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One Hundred and Thirty Third
ANNUAL REPORT
OF THE
South Carolina State Hospital
FOR THE YEAR ENDING JUNE 30, 1956



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Printed Under the Direction of the
State Budget and Control Board

One Hundred and Thirty Third
ANNUAL REPORT
OF THE
South Carolina State Hospital
FOR THE YEAR ENDING JUNE 30, 1956



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State Budget and Control Board

SOUTH CAROLINA STATE HOSPITAL

THE SOUTH CAROLINA MENTAL HEALTH COMMISSION

GEORGE A. BUCHANAN, JR	Columbia
C. M. TUCKER, JR	Pageland
E. EDW. WEHMAN, JR.	Charleston
JOHN M. FEWELL, M.D.	Greenville
SAMUEL G. CREWS	Camden

W. P. BECKMAN, M.D.
State Director of Mental Health

SOUTH CAROLINA STATE HOSPITAL COLUMBIA, S. C.

WILLIAM S. HALL, M.D.
Superintendent

MEDICAL STAFF

COLUMBIA DIVISION

Lawson H. Bowling, M.D.	Clinical Director
Glenn B. Carrigan, M.D.	Chief, Male Service
Joe E. Freed, M.D.	Chief, Female Service
Edward M. Burn, M.D.	Senior Assistant Physician
Elmer W. Long, M.D.	Senior Assistant Physician
Wilbur Merkley, M.D.	Senior Assistant Physician
Wm. G. Morehouse, M.D.	Senior Assistant Physician
Gordan R. Westrope, M.D.	Senior Assistant Physician
Edwin Douglas Curtis, M.D.	Assistant Physician
Louis George Karter, M.D.	Assistant Physician
Leo E. Kirven, Jr., M.D.	Assistant Physician
Victor L. Krueger, M.D.	Assistant Physician
*Frank E. O'Sheal, M.D.	Assistant Physician
Mary Tribble Tobin, M.D.	Assistant Physician
Roland S. Pike, D.D.S.	Dentist

STATE PARK DIVISION

Sol B. McLendon, M.D.	Clinical Director and Chief, Male Service
Irene M. McFarland, M.D.	Chief, Female Service
Albert M. Eaddy, M.D.	Senior Assistant Physician
Purvis James Boatwright, M.D.	Assistant Physician
Robert B. Neil, M.D.	Assistant Physician
Joseph A. Tobin, M.D.	Assistant Physician
Helen M. Williams, M.D.	Assistant Physician
Ben F. Wyman, M.D.	Assistant Physician
Samuel B. Marks, D.D.S.	Dentist

*On Educational Leave.

MEDICAL STAFF CONSULTANTS

George Benet, M.D.	Chief Surgeon
Buford S. Chappell, M.D.	Urologist
James W. Fouche, M.D.	Chest Surgeon
Henry F. Hall, M.D.	General Medicine
George R. Laub, M.D.	Eye, Ear, Nose and Throat
Claude K. Lindler, M.D.	General Medicine
Chas. J. Lemmon, Jr., M.D.	Neurosurgeon
Ben N. Miller, M.D.	Internal Medicine
Austin T. Moore, M.D.	Orthopedic Surgeon
Thos. A. Pitts, M.D.	Roentgenologist
John R. Timmons, M.D.	General Surgeon

NURSING SERVICE

Miss Beulah L. Gardner, R.N.	Director, Nursing Service
Miss Martha Moore Bradley, R.N.	Director, Nursing Education

ADJUNCTIVE CLINICAL ACTIVITIES

Elmore A. Martin, Ph.D.	Chief Psychologist
Miss Ethel Sharpe	Chief, Social Service
Mrs. Lillian B. McIntosh	Director, Occupational Therapy
Mrs. Myrtle E. Mackey, R.Ph.	Chief Pharmacist
Howard W. Paschal	Chief Clinical Laboratory Technician
Harry C. Allison	Chief X-ray Technician
Clifton C. Geiger	Chief Electroencephalograph Technician
Mrs. Ella B. Aiken	Librarian
Mrs. Frances C. Shimmel	Director, Recreational Therapy, Columbia Division
Leon M. Elam	Director, Recreational Therapy, State Park Division

CHAPLAINS

Rev. J. Obert Kempson	Chief
Rev. William M. Major	Columbia Division
Rev. Collie L. Moore	State Park Division

ADMINISTRATIVE STAFF

Lauren W. Shelley	Business Manager
E. A. Hall, Jr.	Treasurer
John W. Whitehouse	Personnel Director
C. W. S. Horne	Registrar

Act of the South Carolina General Assembly establishing and authorizing
the construction of a building for the care and treatment of the men-
tally ill.....December 21, 1821

Original hospital structure for patients, designed by the famous South
Carolina architect, Robert Mills, corner stone laid.....July 22, 1822

Mills Building completed and ready for patients.....December 18, 1827

First patient, young white woman from Barnwell County, admitted
December 12, 1828

MEDICAL SUPERINTENDENTS

1. JOHN WARING PARKER, M.D.
January 1, 1837-1870
Recalled as assistant physician 1876
Remained until death October 11, 1882
2. JOSHUA FULTON ENSOR, M.D.
August 5, 1870 - December 31, 1877
3. PETER E. GRIFFIN, M.D.
January 1, 1878 - May 1891
4. JAMES WOODS BABCOCK, M.D.
August 1, 1891 - March 14, 1914
5. T. J. STRAIT, M.D.
March 17, 1914 - May 1, 1915
6. CHARLES FREDERICK WILLIAMS, M.D.
May 1, 1915 - May 1, 1945
7. COYT HAM, M.D.
May 1, 1945 - January 1, 1949
8. WM. PETER BECKMAN, M.D., Acting Superintendent
January 1, 1949 - October 1, 1949
9. CLEVE C. ODOM, M.D.
October 1, 1949 - July 1, 1951
10. WM. PETER BECKMAN, M.D.
July 1, 1951 - September 1, 1952
11. WILLIAM STONE HALL, M.D.
September 1, 1952—

REPORT OF SOUTH CAROLINA MENTAL HEALTH COMMISSION

Columbia, S. C., July 1, 1956

*To His Excellency, George Bell Timmerman, Jr.,
Governor of South Carolina:*

With funds made available by the General Assembly since 1952, considerable expansion has been made at the S. C. State Hospital. Approximately \$8,000,000 was made available for this expansion.

Before launching this program, the Chairman of the Mental Health Commission, the State Director of Mental Health, the Superintendent of the State Hospital and the hospital's architect visited the states along the Eastern Seaboard where expansion programs were being carried on for State Hospitals and much information was obtained which was helpful in planning the construction program for our hospital.

The hospital was extremely overcrowded but in studying the need the Commission felt that the problem should be approached from the overall point of view to the extent that not only the addition of bed space would be considered but also the needs in other areas that would round out the overall operation of the hospital.

With this purpose in mind, expansion at the hospital has consisted of the construction of a kitchen-bakery-cafeteria at the Columbia Division which will take care of this division's needs for some years to come. The bakery will serve both divisions of the hospital.

Four ward buildings for disturbed patients at the Columbia Division were completed and occupied in 1954. Two similar buildings were constructed at the State Park Division and were completed and occupied in July, 1955. A combination library and recreation building was constructed at the Columbia Division and a similar building at the State Park Division.

There is a tremendous need for medical and surgical services at the hospital and there remains approximately \$2,000,000 for further construction. The Commission is in the process of studying and planning a Medical-Surgical Intensive Treatment Building at the Columbia Division which will exhaust the funds that have been available for new construction. The construction of the six ward buildings added 912 beds. The Taylor Building, however,

which was occupied by 265 disturbed patients had to be torn down because of being condemned as unsafe for occupancy. Since this building had to be razed the net gain in beds amounted to only 647. Each year there is a net gain in hospital population ranging between 75 and 100 patients and this gain in population is gradually returning the hospital to its seriously overcrowded condition. Experience with the new buildings has been very satisfactory merely from the point of giving the patients adequate bed space.

Just recently the architect has surveyed the hospital to determine the bed capacity based on U. S. Public Health and State Board of Health requirements. This report was based on 70 square feet per bed in most areas and 60 square feet per bed in other areas. On this basis the total bed capacity for the Columbia Division now is 2,621 and for the State Park Division 2,035 making a total bed capacity of 4,656. The population of the hospital as of June 30, 1956 was 6,199, and the yearly average was 6,113.

With \$200,000 that has been appropriated for renovation of existing buildings, the Talley Building and Thompson Building which were vacated when disturbed patients were moved to the new buildings have now been renovated and put in good condition and are occupied by female patients moved from other areas of the hospital. The renovation of these buildings has been done by the hospital's maintenance force at a much lesser cost than if this work were contracted. The remainder of this fund will be used in the same manner chiefly to renovate buildings at the State Park Division of the hospital.

In spite of the accomplishments mentioned above there is still great need for further improvements at the State Hospital. These needed improvements involve the basic operation needs at the hospital as well as further additional bed space.

At the State Park Division of the hospital one cannot expect the present kitchen facilities much longer to take care of the need of supplying adequate food service at that division. The laundry is in deplorable condition and cannot meet the needs of this division of the hospital. The laundry at the Columbia Division has reached its capacity of operation and is barely taking care of the laundry needs at this division of the hospital.

In order to keep pace with the annual increase of patients at the hospital it is very urgent that there be further construction to provide more bed space.

During the next meeting of the General Assembly, the Commission will ask for funds to provide the following facilities at the State Hospital.

Laundry Building	\$ 500,000.00
Central Kitchen and Dining Room—State Park...	900,000.00
Receiving Ward Building—Columbia	1,000,000.00
Geriatric Ward Building—Columbia	2,000,000.00
Infirmiry Building—State Park	1,000,000.00
Nurses Class Room and Quarters—State Park.....	200,000.00

Major Renovations:

Center Building—Columbia	150,000.00
Ward Buildings—State Park	100,000.00

Total	\$5,850,000.00
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During this fiscal year from funds appropriated by the Legislature for maintenance the hospital has operated on a per diem capita of \$2.25. The expenditure of our maintenance funds has required constant study in order that the hospital might be operated in as satisfactory and efficient manner as possible.

With the per diem capita of \$2.25 there has not been sufficient funds to increase medical personnel which is so badly needed to provide sufficient intensive treatment so that each person admitted to the hospital can be given a maximum opportunity to get well and return home.

During the year there were 1,782 new admissions and 561 readmissions of persons who have once been in the hospital and have remained out of the hospital a year or more. Not only is there greater need for increasing medical personnel to provide more intensive treatment but there is also great need to study those cases readmitted as to why they were not able to stay out of the hospital and what additional services would be required to lower readmissions to the hospital.

On a whole it is felt that the hospital is rendering the people of South Carolina a good service out of all proportion to the money spent but there is still room for further improvement

which can come only by additional expenditures. This opportunity is taken to express our sincere appreciation to the Superintendent and all of his staff for their untiring efforts and devotion in the care and treatment of mentally ill.

The S. C. Mental Health Commission continues the operation of its statistical section, gathering statistics from all mental health facilities—the State Hospital, Whitten Village, Pineland and four mental health clinics. It cooperates with the National Institute of Mental Health—Biometrics Branch—by rendering annual statistical reports.

In carrying out its duties with reference to licensing institutions caring for the mentally ill, mentally retarded, alcoholic, senile and epileptics, it has licensed during the year two institutions for the mentally ill, one private and one state; two state institutions for the care of the mentally retarded; two general hospitals operating psychiatric departments and four private rest homes for alcoholics.

Because of the availability of Remington-Rand punch card and tabulating equipment, the Commission has continued to render payroll service to the S. C. State Hospital, Pineland and the Mental Health Clinics.

The Commission continues the investigation of the financial status of all new admissions to our mental health facilities in order to determine who might be placed on a paying status. It has been ably assisted in this matter by the State Department of Public Welfare through its county units. The investigation of all older residents at Whitten Village has been completed and in the early part of the next fiscal year an effort will be made to complete the investigation of all older residents of the S. C. State Hospital. During the fiscal year 1955-1956, reimbursements in the amount of \$194,581.72 were received from persons being rendered service at the State Hospital; \$49,164.88 from persons receiving services at Whitten Village and \$78.00 from persons receiving services at Pineland, making a total of \$243,824.60.

Under its Mental Hygiene Division the Commission has continued operation of four mental health clinics, one at Charleston, one at Columbia, one at Greenville and one at Spartanburg. These clinics constitute an important link in the overall program for the treatment and prevention of mental illness. The clinics are designed particularly for the diagnosis and treatment of

lighter forms of mental illness as well as the incipient stages of rather serious mental illness. The personnel of the clinics also assist in our Mental Health Education Program by cooperating with the central staff of the Mental Health Education Unit as well as participating in such services in the community in which the clinic is located. During the year the clinics conducted 10,823 person-interviews with or about patients; there were 433 group psychotherapy sessions with a total of 2,004 person-interviews; there were 926 new admissions to the clinics and 76 readmissions, making a total of 1,002. Of this number 506 were below the age of 18 and 496 above the age of 18 years. During the year the clinics' staffs spent 1,824 hours for community services other than actual treatment of persons in the clinics and 490 hours after clinic hours for the same purpose.

In promoting its program of Mental Health Education the Commission continues to add to its visual aid library films that have a direct bearing on mental health and the film library now contains 146 films. These visual aids have proved every valuable media in the promotion of a Mental Health Education Program. They are in great demand by public schools, P.T.A. organizations, ministerial groups, Public Health Departments and other civic, county and state organizations.

Further media for the purpose of Mental Health Education consist of our book and pamphlet libraries. Some pamphlets are available for free distribution; others, however, are bought in large numbers so that they can be sold for minimum charges. The book library is used quite a bit by high school and college students as well as members of staffs from other state agencies.

The Director has been assisted in the Mental Health Education Program by a clinical psychologist for the greater part of the year. In the latter part of the fiscal year it was possible to employ a well qualified psychiatric social worker to further assist in this program. Other state agencies as well as community organizations and groups make many requests for Mental Health Education services and these persons are continually busy trying to meet these demands. It is hoped that other personnel might be added for this purpose in order that the need for such services might be more adequately met.

To the Governor, the General Assembly, the other state agencies and departments, the staffs of the State Hospital, the training

schools, the clinics and the employees of the Commission's central office, the Commission tenders its thanks for aid given in the handling of this most distressing of medical problems.

Respectfully submitted

G. A. BUCHANAN, JR., *Chairman*

C. M. TUCKER, JR.

E. EDWARD WEHMAN, JR.

JOHN M. FEWELL, M.D.

S. G. CREWS

South Carolina Mental Health
Commission

SUPERINTENDENT'S REPORT

Columbia, S. C., July 1, 1956

To The South Carolina Mental Health Commission:

Gentlemen:

In compliance with your requirements the following report of the activities of the South Carolina State Hospital for the year ending June 30, 1956 is herewith submitted:

MEDICAL DEPARTMENT GENERAL STATISTICS

July 1, 1955 through June 30, 1956

	White Men	White Women	Negro Men	Negro Women	Total
Patients on books of hospital at beginning of hospital year.....	1,755	2,181	1,752	1,709	7,397
Admissions during twelve months:					
First admissions.....	667	526	354	235	1,782
Re-admissions	213	197	62	89	561
Total received.....	880	723	416	324	2,343
Total on books during twelve months.....	2,635	2,904	2,168	2,033	9,740
Discharged from books during twelve months:					
Recovered	25	14	41	12	92
Improved	232	431	191	269	1,123
Unimproved	22	10	13	14	59
*Unclassified	303	87	39	33	462
Total discharged.....	582	542	284	328	1,736
Died during twelve months.....	156	140	99	60	455
Total discharged and died.....	738	682	383	388	2,191
Patients remaining on books at end of hospital year:					
In hospital.....	1,500	1,696	1,616	1,387	6,199
On trial visit or otherwise absent.....	397	526	169	258	1,350
Total.....	1,897	2,222	1,785	1,645	7,549
Daily average in hospital.....	1,466	1,661	1,577	1,409	6,113

*Includes those found without mental disorder.

ADMISSIONS

There were 2,343 patients admitted during the year, with 84 of them on a voluntary basis.

VOLUNTARY ADMISSIONS

White Men	White Women	Negro Men	Negro Women	Total
42	33	6	3	84

DISCHARGES

Discharged from the books were 1,736 patients of whom 155 were alcoholics and 6 drug addicts without mental disorder.

Of the 104 patients diagnosed as being alcoholics with mental disorder 96 were discharged.

DEATHS

Death occurred in 455 cases or 4.7% of the entire patient population under treatment during the twelve months.

There were 156 white men; 140 white women; 99 Negro men and 60 Negro women.

The leading cause of death continued to be diseases of the circulatory system.

COURT CASES

During the year 135 persons were committed to the hospital for psychiatric examination by the Courts of General Sessions, the County Courts and by the Juvenile Domestic Relations Courts.

COURT CASES

PSYCHOSES	White Men	White Women	Negro Men	Negro Women	Total
Acute Brain Syndromes Associated with:	1				
Other diseases and condition, NEC (not elsewhere classified), or unspecified disease or condition.....	..	..	1	..	1
Chronic Brain Syndromes with Psychotic Reaction, Associated With:					
Central nervous system syphilis.....	2	..	1	..	3
Other trauma.....	1	..	..	..	1
Cerebral arteriosclerosis.....	..	1	2	..	3
Convulsive disorder.....	..	..	2	..	2
Other diseases and conditions, NEC, or unspecified disease or condition.....	1	..	..	..	1
Psychotic Disorders:					
Affective reactions.....	2	..	..	..	2
Schizophrenic reactions.....	10	1	13	3	27
Psychoneurotic Disorders.....	1	..	..	..	1
Personality Disorders:					
All other personality disorders.....	3	..	..	..	3
Mental Deficiency.....	..	..	2	1	3
No Mental Disorder.....	60	6	21	1	88
Total.....	80	8	42	5	135

COMMITTED BY ORDER OF GOVERNOR

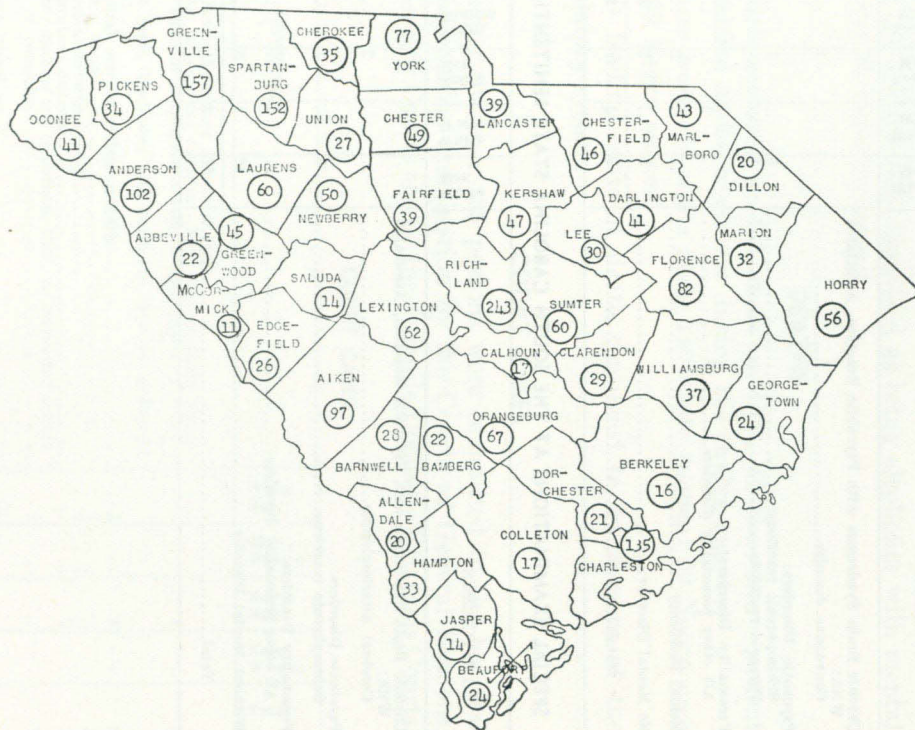
PSYCHOSES	White Men	White Women	Negro Men	Negro Women	Total
Chronic Brain Syndromes with Psychotic Reaction, Associated With:					
Convulsive disorder.....	..	..	1	..	1
Psychotic Disorders:					
Schizophrenic reactions.....	5	..	1	..	6
Paranoid reactions.....	1	..	..	..	1
Personality Disorders:					
All other personality disorders.....	..	1	..	..	1
Mental Deficiency.....	..	..	2	..	2
No Mental Disorder.....	3	..	3	3	9
Total.....	9	1	7	3	20

SPECIAL EXAMINATIONS AT THE SOUTH CAROLINA STATE PENITENTIARY

PSYCHOSES	White Men	White Women	Negro Men	Negro Women	Total
Chronic Brain Syndromes with Psychotic Reaction, Associated With:					
Cerebral arteriosclerosis.....	..	..	2	..	2
Psychotic Disorders:					
Schizophrenic reactions.....	5	..	1	..	6
Personality Disorders:					
All other personality disorders.....	..	1	..	..	1
Without Mental Disorder.....	12	1	8	..	21
Total.....	17	2	11	..	30

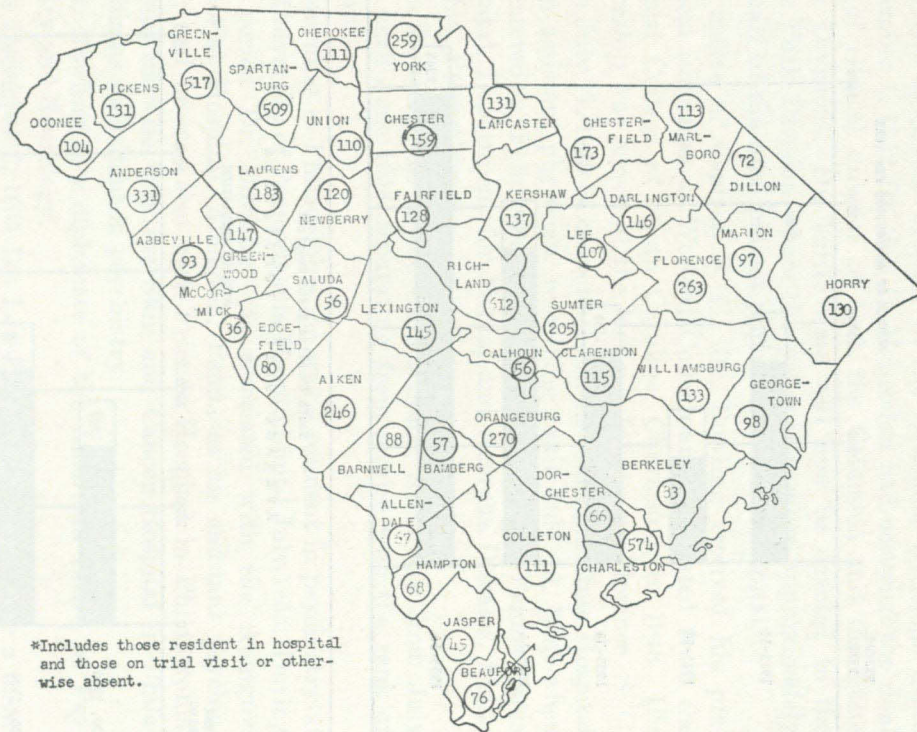
SOUTH CAROLINA STATE HOSPITAL

Patients Received By Counties Fiscal Year 1955-56

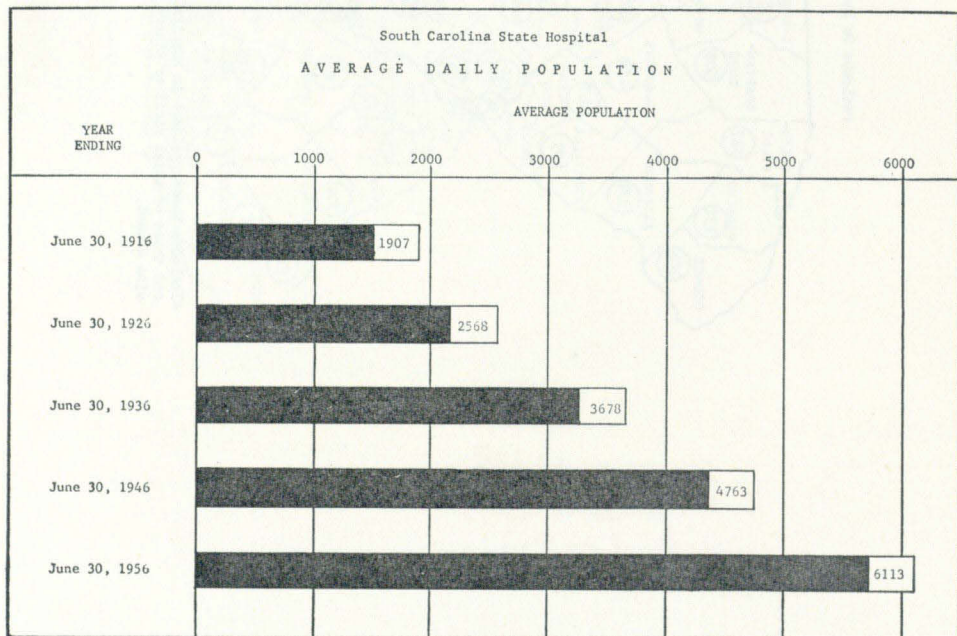
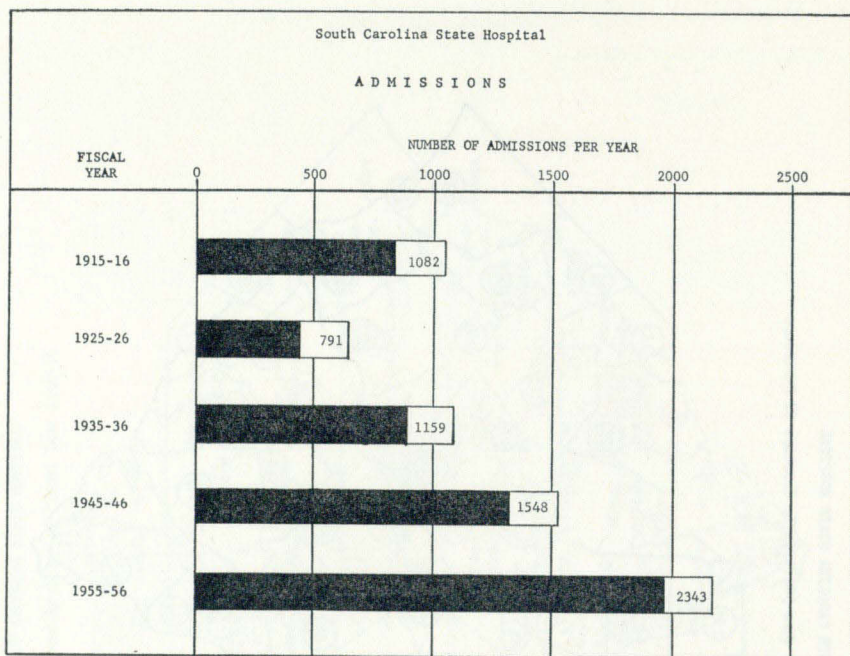


SOUTH CAROLINA STATE HOSPITAL

Patients On Books* June 30, 1956 By Counties Of Residence



*Includes those resident in hospital and those on trial visit or otherwise absent.



MEDICAL STAFF

On August 1, 1955 Dr. Lawson Hamilton Bowling, Jr., assumed his duties as clinical director of the Columbia Division. Since September 1, 1952 Dr. Sol. B. McLendon had occupied the dual role of clinical director of both the Columbia and the State Park Divisions. His entire time will now be devoted to the State Park Division where the patients number approximately one-half of the total patient population of the hospital.

A native of Central, S. C., Dr. Bowling received his pre-medical education at Wofford College and graduated from the Medical College of South Carolina, Charleston, in 1948. His internship was served at the McLeod Infirmary, Florence, S. C.

On July 11, 1949 he came to the South Carolina State Hospital as an assistant physician, remaining until July 10, 1950 when he entered a Fellowship in psychiatry at the Pennsylvania Hospital, Department for Mental and Nervous Diseases, Philadelphia, Pennsylvania.

Dr. Bowling was in the United States Air Force from July 1951 until June 1953, separating from service with the rank of captain.

Returning to Philadelphia, he was a resident in psychiatry at the University of Pennsylvania Hospital until July 1955. During this period Dr. Bowling was associated with the Abington Memorial Hospital, Abington, Penn., as an assistant psychiatrist; and he was also with Friends Hospital in Philadelphia. He was likewise with the Skin and Cancer Hospital in Philadelphia as consultant in psychiatry.

Dr. Bowling is a diplomate of the American Board of Psychiatry and Neurology.

On December 1, 1955 Dr. Leo E. Kirven, Jr., became a member of the medical staff with assignment as an assistant physician on the men's service, State Park Division. On January 13, 1955 Dr. Kirven was transferred in the same capacity to the men's service, Columbia Division.

A native of Pinewood, S. C., Dr. Kirven is a graduate of Clemson College; and of the Medical College of South Carolina, June 1954. When a rising senior at the Medical College he spent the summer of 1953 at the South Carolina State Hospital as a junior intern. His internship was served at the Columbia Hos-

pital in Columbia, and prior to joining the medical staff here he was engaged in private practice in Summerton, S. C.

Dr. Purvis James Boatwright on June 15, 1956 joined the medical staff as an assistant physician, women's service, State Park Division. A native of Darlington, S. C., and a graduate of the Medical College of South Carolina, Charleston, 1930, his internship was served in Bellevue Hospital, New York City. For a number of years Dr. Boatwright was engaged in private practice in Orangeburg, specializing in surgery; and during the past two years he has been medical director of the Tidewater Hospital, Beaufort, S. C.

Dr. Jane N. Higbee, assistant physician women's service, Columbia Division, since September 7, 1954, resigned and left November 19, 1955 to join the medical staff of the Veterans Administration Hospital, Salisbury, North Carolina. Her husband, Dr. Dale S. Higbee, psychologist here until November 10, 1955, had accepted a similar position at that hospital.

Dr. Ralph Hill Chaney, Jr., assistant physician men's service, Columbia Division, resigned and left January 7, 1956 to enter private practice in Toccoa, Georgia. He had been on the medical staff since September 1, 1953.

On July 15, 1955 medical student Clay W. Evatt from the Medical College of South Carolina, who reported for summer duty as a junior intern, left for other activities.

During the month of August 1955 these rising seniors who had been at the hospital as junior interns since June 6, 1955 left for a vacation before returning to their studies:

Messrs. Frank L. Gantt, Chris H. Biser, Robert M. Prince, Jr., Richard M. Carter, Kenneth P. Huggins, Eugene M. Baker, Fred Schild, David W. Mauldin, John E. Major and S. Elliott Puckett, Jr., from the Medical College of South Carolina, Charleston; and Preston C. Manning, Jr., Yale University School of Medicine, New Haven, Conn.

In the early part of June 1956 these medical students reported as junior interns during the summer:

Messrs. Melvin D. Medlock, Marshal L. Shearer, W. D. Clarkson, Robert N. Milling, Robert Rasheed and Robert Davis, Jr., from the Medical College of South Carolina, Charleston; and James H. Fleming, Jr., from Vanderbilt University School of Medicine, Nashville, Tennessee.

These young medical students were assigned to special services at the Columbia and the State Park Divisions where, under the direction of the staff physicians, they performed routine ward duties, attended staff conferences, and in general gained knowledge and insight into mental illnesses and methods of therapy therefor.

From October 1955 through May 1956 small groups of students from the Medical College of South Carolina were assigned to the hospital for one week each for intensive psychiatric study and ward experience.

The Board of Trustees, Medical College of South Carolina, Charleston, on September 22, 1955 elected as associate clinical professor of neuropsychiatry, Dr. William S. Hall, superintendent, S. C. State Hospital. At this meeting there were also elected as assistant clinical professors of neuropsychiatry other staff members: Dr. Lawson H. Bowling, clinical director, Columbia Division; Dr. Sol B. McLendon, clinical director, State Park Division; Dr. Joe E. Freed, Dr. Edward M. Burn and Dr. William G. Morehouse, Columbia Division. For many years there has been at the Medical College a course of instruction in psychiatry, which for a long while was conducted by the late Dr. C. Fred Williams, hospital superintendent, who was the first professor of psychiatry at the college. He inaugurated the policy of having the senior students come to the hospital in small groups for additional psychiatric information and practical experience with the mentally ill. In recent years Dr. J. J. Cleckley of Charleston has been in charge of the Department of Neuropsychiatry of the Medical College, with the senior students continuing to spend a specified time at the S. C. State Hospital for intensive study of psychiatry and practical experience here.

Dr. Hall and Dr. W. P. Beckman, State Director of Mental Health, spoke on August 11, 1955 at the annual convention of South Carolina Probate Judges Association in Aiken referable to the facilities available at the hospital and the existing great needs. Accompanying them were Dr. Sol B. McLendon, clinical director, State Park Division; Dr. Lawson H. Bowling, clinical director, Columbia Division, and C.W.S. Horne, hospital registrar.

During the year the superintendent, Dr. Hall, was also the guest speaker on these programs:

February 23, 1956, annual meeting, Richland County Association for Mental Health, YWCA, Columbia, on the subject, "The Present Status of the South Carolina State Hospital."

April 2, 1956 the mental health problem in South Carolina was discussed on a WIS TV Palmetto Press Conference program with Gren Seibels of that station as moderator.

June 4, 1956 a talk was made on "The South Carolina State Hospital, Past, Present and Future," at the Florence Rotary Club and at the Camden Rotary Club on June 28, 1956.

The May 1956 issue of The Southern Medical Journal carried an article "The Effect of Puromycin Against Entamoeba Histolytica and Other Intestinal Parasites" by Dr. Martin D. Young, scientist director, U. S. Public Health Service Laboratory of Tropical Diseases, and Dr. Joe E. Freed, chief, women's service, Columbia Division. The authors expressed appreciation for the cooperation and assistance of staff members, Dr. Edward M. Burn and Dr. Wm. G. Morehouse, the hospital ward personnel and the personnel of the Laboratory of Tropical Diseases.

On October 19, 1955 when securing naturalization papers and becoming a United States citizen, Dr. Erwin O. Kuerbs had his name officially and legally changed to Dr. Edwin Douglas Curtis. A native of Hanover, Germany, he has been on the women's service staff, Columbia Division, since October 1, 1953.

During the year there were three additions to the medical staff. Two physicians resigned and left, and one remains on educational leave.

The continued rapid increase in the patient population and the efforts to provide the newest methods of therapy for the mentally ill emphasize the urgency for a larger medical staff, additional nurses and psychiatric aides, as well as adjunctive therapists, to give the desired care and treatment and to maintain the standards of efficiency.

The regular scientific meeting of the Columbia Medical Society of Richland County was held at the hospital on August 8, 1955, preceded by a dinner in the new air conditioned cafeteria of the Food Service Center.

Dr. Frank C. Owens, president, called the meeting to order, and the welcome was extended by the hospital superintendent, Dr. Hall, who gave a comprehensive account of the expansive

building program and other interesting facts pertaining to the hospital. Dr. McLendon, clinical director, State Park Division, introduced the guest speaker, Dr. Robert C. Rendtorff, surgeon, U. S. Public Health Service Laboratory of Tropical Diseases, Columbia, whose informative paper was referable to "Toxoplasmosis."

The 7th Mental Hospital Institute in Washington, D. C., at the Sheraton-Park Hotel, October 3-6, 1955, was attended by Dr. Hall, Dr. Bowling, Dr. Freed, and Dr. Irene M. McFarland, chief, women's service, State Park Division.

On Thursday, October 13, 1955, the Board of Directors, S. C. Association for Mental Health, Werber Bryan of Sumter, chairman, had an all day session at the hospital during which there was an extensive tour of both the Columbia and the State Park Divisions.

On November 9, 1955 the fourth annual Institute on Alcoholism sponsored by the South Carolina Conference of Social Work was held in the Main Street Methodist Church in Columbia with the theme, "The State's Responsibility for a Program for the Rehabilitation of Alcoholics."

This program was presented with all the speakers from Columbia:

"What Some Other States are Doing About the Matter of Rehabilitating Alcoholics", Dr. W. P. Beckman, State Director of Mental Health, S. C. Mental Health Commission; "The Problem of Alcoholism in South Carolina", Dr. William S. Hall, Superintendent, S. C. State Hospital; "Some Aspects of an Effective Rehabilitation Program", Rev. Maxie C. Collins, Director, Fairview Alcoholic Rehabilitation Center; and "The Present Status of Efforts Toward Getting a State Rehabilitation Program in South Carolina", Rev. J. Kenneth Morris, Rector, St. John's Episcopal Church.

At the annual meeting of the Southeastern Society of Neurology and Psychiatry held in the Jefferson Hotel, Columbia, on Tuesday, January 31, 1956, with Dr. Hall, president, presiding, Dr. Edward M. Burn, senior assistant physician, Columbia Division, was elected vice-president for the ensuing year. This society is composed of psychiatrists, neurologists and physicians particularly interested in psychosomatic medicine throughout South Carolina and eastern Georgia.

On March 21-23, 1956 in the Biltmore Hotel, Atlanta, Georgia, Dr. W. P. Beckman, State Director of Mental Health, and Dr. Hall attended a conference of State mental health agencies and representatives of schools of social work in the South to consider important problems in this phase of mental health activities. The meeting was suggested by the Executive Committee, Southern Regional Council on Mental Health Training and Research.

Attending the psychiatric seminar sponsored by the Medical College of South Carolina in conjunction with the S. C. Mental Health Commission, held at the college in Charleston March 23, 1956 were Dr. Beckman and Dr. Hall enroute from Atlanta; Dr. Bowling, Dr. Gordon R. Westrope and Dr. William G. Morehouse.

The annual meeting of the American Psychiatric Association in Chicago, Illinois, on April 30 - May 4, 1956 was attended by Dr. Beckman, Dr. Hall, Dr. Bowling, Dr. Glenn B. Carrigan and Dr. Joe E. Freed.

The May 23, 1956 meeting in Augusta, Georgia, of the Southeastern Society of Neurology and Psychiatry was attended by Dr. Beckman, Dr. Hall, Dr. Bowling, Dr. Morehouse, and Dr. Burn, vice-president of the society.

On Saturday morning, October 15, 1955, Dr. Coyt Ham passed away in the Columbia Hospital after a brief illness. He was associated with the hospital from November 1, 1921 when he became an assistant physician, until he left January 1, 1949 while occupying the position of superintendent. In the interim Dr. Ham was senior assistant physician for 17 years, 1926-1943; clinical director for two years, 1943-1945; and superintendent from May 1, 1945 until January 1, 1949. Upon termination of his connection with the hospital Dr. Ham specialized in neuropsychiatry in Columbia. His death is regretted by personnel and patients alike.

MEDICAL DEPARTMENT DATA

On June 30, 1956 there were 23 full time physicians (psychiatrists), including one on educational leave; 10 part time physicians; 58 registered nurses available for ward duty, including the supervisors; and 676 psychiatric aides.

New Working Hours

The three-shift eight-hour day for nurses and psychiatric aides continued most satisfactory from every standpoint. There was created a more contented attitude of the personnel with more efficient care of patients. As previously stated, this change necessitated additional personnel which continues inadequate because of the rapidly increasing admission rate in every service and the many newer therapies and activities provided.

Orientation Courses for Aides

The intensive orientation course for psychiatric aides at the Columbia and State Park Divisions was increased to 56 hours. Conducted by medical staff members and representatives from various sections of the hospital the course continued to reflect a clearer understanding of duties and responsibilities, and more efficient work performance. Details pertaining to this important phase of hospital activities are in the nursing service report.

Affiliate Student Nurses

On July 4, 1955 the 21st group of affiliate student nurses from schools of nursing throughout the State reported for the prescribed twelve weeks psychiatric training and practical experience in the hospital. During the period of this annual report a total of 255 students had such training here, as outlined in comments of the nursing education service.

Additional Parking Areas for Visitors

In December 1955 there was completion of additional parking areas for cars of visitors at the Columbia Division, with surfacing of most of them by the S. C. State Highway Department, and the erection of indicated signs. The widening of the south section of Pickens Street within the Columbia Division grounds considerably increased much needed space. At the State Park Division more parking space for visitors' cars was provided.

Visit of the General Assembly Members

In January 1956 members of the General Assembly spent considerable time touring the new buildings and other areas of

the hospital. These groups, the Senators and Members, House of Representatives, were guests of the hospital for lunch at the time of visiting here.

Seminar for Laboratory Technicians

On February 10, 1956 in the Williams Building Auditorium, Columbia Division, a group of 42 physicians and laboratory technicians attended a seminar sponsored by the American Red Cross Blood Bank of Columbia. With Dr. S. E. Wheeler, medical director, S. C. Regional Blood Center, presiding, the group was welcomed by the hospital superintendent and this program presented:

"Replacement Blood Transfusions for Rh Babies", George Holland, Baptist Hospital, Columbia; "Blood Service to Our Hospitals", John Manning, Clarendon Memorial Hospital, Manning; "Blood Derivatives", Dr. J. N. Ashworth, assistant director, technical, National Headquarters, Washington, D. C., and Dr. J. A. Hertell, director, Blood Programs, Southeastern Area, Atlanta, Georgia; "Techniques of Blood Bank Procedures", Dr. Sam Gibson, associate director, Blood Program, National Headquarters, Washington, D. C.

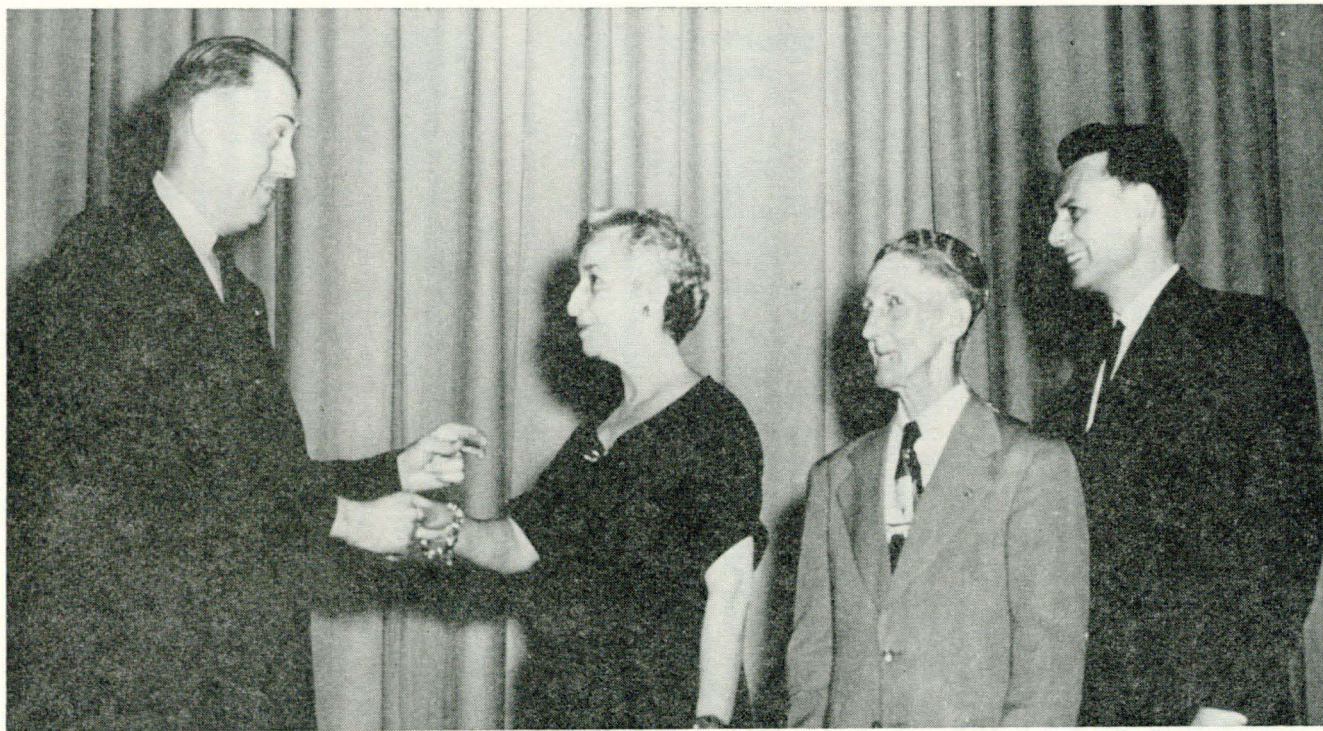
A buffet luncheon was served in the Ensor Research Laboratory after which there was a tour of the hospital laboratory facilities under the guidance of the chief clinical laboratory technician, Howard W. Paschal, and his personnel.

Service Award Program

On February 10, 1956 the superintendent honored eighty-four of the hospital personnel with service emblems and certificates in the second series of such presentations.

In each ceremony, one in the Benet Auditorium, Columbia Division, and the other in the Fisher Auditorium, State Park Division, Dr. Hall commended the loyal devotion to duties and responsibilities, and the cooperation which have enabled the hospital to reach a standard of excellence in efficient personal care of the more than six thousand mentally ill patients.

In April 1955 Dr. Hall initiated this recognition and appreciation of continuous service rendered by the South Carolina State Hospital personnel.



Dr. William S. Hall, superintendent, South Carolina State Hospital, presenting diamond emblems for 40 years continuous hospital service to Mrs. Inez Nolan Fripp, secretary of the superintendent, and to Walter N. Blanks, maintenance foreman, in a ceremony in the Benet Auditorium, Columbia Division, on February 10, 1956.

To the right is John W. Whitehouse, personnel director and designer of the emblem.—Photo by Jimmy Price Studio.

The emblem, either a pin or lapel button, designed by the personnel director, has in red enamel a replica of the Administration Building, Columbia Division. For five years the emblem is silver. The others are gold with the designated jewel indicating the years devoted to the hospital: ten years, pearl; twenty, ruby; thirty, sapphire; and diamond for completion of forty years continuous hospital service.

Dr. Hall awarded the first diamond emblem to Mrs. Inez Nolan Fripp on Feb. 10, 1956, who has in this long continuous hospital association been secretary to the hospital superintendent. He commented on the honor of being the first recipient of this recognition, and expressed appreciation for her loyalty and efficiency.

The second in service to be honored with the diamond emblem was Walter N. Blanks, maintenance foreman, who through the years has been conscientious, efficient and devoted to the hospital's interests.

At the Columbia Division sapphire pins for thirty years unbroken service were received by Miss Maude E. Moore, R.N., men's service, and Mrs. Nell W. Allison, R.N., women's service.

For twenty years continuous service ruby emblems were awarded to Mrs. Ruby L. Phillips, medical auxiliary service; Mrs. Emily D. Turnipseed, psychiatric aide, women's service; Robert J. Dowie, farm division; and John C. Youngblood, supply division.

The other personnel in the Benet Auditorium were then presented the indicated emblems and certificates.

On the same date in the Fisher Auditorium of the State Park Division Dr. Hall signally honored Gene Simons of the farm division, and awarded him the sapphire emblem for thirty years continuous service, with commendation for faithful and splendid service.

Dr. Sol. B. McLendon, clinical director, State Park Division, for years closely associated with the personnel there, presented at the request of the superintendent, the ruby emblem of twenty years service to Ernest Baxley, engineering division; and to the others the indicated emblems and certificates for continuous service of ten and five years.

A certificate of service accompanied each emblem, a copy of which is placed in the individual's personnel file with the date of the award.

Traffic Safety Meetings

For the protection of patients and personnel, as well as property, Dr. Hall with the cooperation of Chief Highway Commissioner C. R. McMillan, S. C. State Highway Department, secured Sergeant Billy E. Fallaw of that department to present the situation in a series of meetings at the Columbia Division on August 1, 2 and 3, 1955. Sergeant C. H. Bailey later conducted a similar series of talks to the personnel at the State Park Division.

Photographing and Fingerprinting Patients and Personnel

During the month of February 1956 there was initiated at the Columbia and the State Park Divisions the photographing and fingerprinting of all patients for the purpose of positive identification, sometimes essential in case of accident or absence from the hospital. Such data is made a part of the individual case record to be regarded in the same confidential manner. This is not prepared for the law enforcement agencies.

Since February 1, 1956 all new employees have been photographed and fingerprinted.

A member of the hospital personnel with Navy photographic training and special work in fingerprinting, is in charge of these procedures.

Employees' Annual Barbecue

The annual barbecue and dance sponsored by the Columbia Division personnel were held at Heise's pond on April 30, 1956 with about 300 attending. Music was furnished by Frank Bolick's orchestra.

Clinic Day

On April 20, 1956 Clinic Day was again held at the hospital for psychology students from colleges and universities throughout the State.

An excellent program prepared under the direction of Charles H. Preshler, hospital psychologist, was presented with Dr. Lawson H. Bowling, clinical director, Columbia Division, as moderator. Films depicting various types of mental disorders were shown with explanations.

The welcome was extended by Dr. William S. Hall, superintendent, who spoke on "The Present Status of the S. C. State Hospital." Carl A. Bramlette, Jr., Ph.D., chief psychologist, Richland County Mental Health Clinic, talked on "The Role of the Community Clinics in Mental Health."

The various facilities in the Benet Auditorium, and the Horger Library were visited, as well as various buildings and wards with typical case presentations by Dr. Bowling and several staff members of the women's service. They were assisted by a group of psychologists and the hospital chaplains.

Affiliate student nurses served as guides.

Educational Visits

Schools and colleges from all over South Carolina continued to manifest much interest in mental health and in the hospital, and many groups were conducted through sections of both divisions.

National Mental Health Week Open House

In cooperation with National Mental Health Week, May 1-7, 1956, the general public again had opportunities to secure by personal observation information pertaining to the hospital, the many facilities, and efforts in behalf of the mentally ill of South Carolina, as well as to get some idea of the great needs here. Graduate nurses, affiliate student nurses, psychiatric aides and others of the hospital personnel conducted the numerous visitors through buildings, wards and departments when Open House was held at the Columbia and the State Park Divisions on Tuesday, May 1, 1956, between 10 and 11:30 a. m. and from 2 to 4:00 p. m.

National Food Service Award

On May 7, 1956 at the presentation luncheon in the Sheraton Hotel, Chicago, Leland E. Crenshaw, director of food service, accepted for the hospital the 1956 Food Service Award national honor plaque of metal on a walnut base for outstanding achievement in food service installation design in mass feeding institutions (cafeterias, clubs, colleges, hospitals, hotels, restaurants.) Sponsored by Institutions Magazine, these 1956 Food Service

Awards were presented in conjunction with the opening of the National Restaurant Association Show in the Navy Pier in Chicago May 7 through 11, 1956. The primary purpose of the National Food Service Awards Contest is to promote and officially recognize the most outstanding achievements in food service installation design in the preparation and serving of food in great quantities. The hospital's entry, judged by a panel of experts as one of the finest food service installations in existence today, was on display in photographic and blue print form. The entries were judged by "the highest standards of sanitation, super efficiency, and superlative achievement in storing, handling, preparation and serving food." Lauren W. Shelley, business manager, and James L. Hiers, former director of food service, assisted in the planning and construction of the hospital's kitchen-bakery-cafeteria combination completed in 1954.

Motor Vehicle Identification Decals

Beginning June 18, 1956 all members of the personnel who drive or park motor vehicles on the grounds are required to register them with the personnel office and secure without cost an identifying decal to be placed on the windshield of the car.

The number of motor vehicles operating on the hospital grounds has so markedly increased that such identification is necessary to facilitate employees entering and leaving the grounds, and to entitle them to the privilege of parking in designated areas. The current South Carolina driver's license must be presented at the time of registration.

Palmetto Variety

Palmetto Variety, the S. C. State Hospital newspaper initiated by the superintendent with the first issue in June 1954, continued to be a source of information and current news from every section of the hospital. From a small magazine Palmetto Variety has expanded into a large newspaper of interest to personnel and patients, and of increasing value for ready reference purposes.

Many hospitals and organizations throughout the United States have commented favorably about this newspaper which is prepared, edited and published by personnel and patients.

Dr. Sol. B. McLendon, clinical director, State Park Division, is the advisor. Mrs. Frances C. Shimmel, recreational therapy director, is the editor with a patient staff of Johnny B., assistant editor, and Mrs. Helen B., typist.

Ministerial Visitors

The Columbia Ministerial Association spent Thursday, February 16, 1956, at the Columbia Division securing information referable to the hospital from a talk by the superintendent, and an extensive tour conducted by staff members after lunch in the Mills Building cafeteria.

The monthly meeting of the Columbia Ministerial Alliance was held in the Fisher Auditorium, State Park Division, on Tuesday, March 27, 1956. After lunch the group went on a tour of representative sections of the hospital.

On Friday, April 13, 1956, the wives of the clergy of Greater Columbia representing the various denominations, were here for lunch and a visit through various areas under the personal guidance of Dr. Bowling, the two Columbia Division chaplains and several of the nursing personnel. The hospital superintendent spoke to the group regarding activities for the patients.

Other Visitors

On October 20, 1955 a group from St. Elizabeth's Hospital, Washington, D. C., spent a short while here securing information about the hospital: Mrs. Doris D. Sutton, chief dietitian, one of her associates, Mrs. Lennice A. O'Hara, and Miss Mary Counties, chief physiotherapist.

On November 29 and 30, 1955 visitors from the General Office, Department of Public Welfare, Springfield, Illinois, made a brief, intensive survey of the dietary facilities and the new kitchen-bakery-cafeteria of the Columbia Division preparatory to completing plans for such facilities in that State. The guests were: Mrs. Ethel Boyle, supervisor, Home Economics Section; Arthur Kessell, State Division of Architecture and Engineering and Samuel A. Litchman, representative, Associate Architects, engaged by the State of Illinois to prepare the plans.

HARDEN STREET EXTENSION THROUGH HOSPITAL GROUNDS APPROVED

On Tuesday, September 20, 1955, the S. C. Mental Health Commission approved a route through the S. C. State Hospital grounds for the Harden Street extension, which for at least 30 years had been in varying degrees of discussion and dispute.

The formal resolution granting a right-of-way for this extension was passed by the Commission on Tuesday, December 13, 1955, and the chairman, George A. Buchanan, Jr., authorized to sign the easement to the S. C. State Highway Department, when approved by the Attorney General.

The resolution made the easement subject to conditions outlined by the S. C. Mental Health Commission and agreed to by the S. C. Highway Department and the Richland County Delegation at a meeting on November 8, 1955.

The main conditions were: two underpasses on the hospital grounds for the safety of patients; a railroad underpass for vehicular traffic; the prohibiting of "heavy duty" trucks with attendant noise; a cyclone fence on one side of the extension and a concrete wall on the other for reduction of noise and to shield patients from vehicle lights.

The agreement was for a route to go straight through the hospital grounds from Harden Street at the Southern railroad to the intersection of Colonial Drive at Sligh's Avenue, just below the point where Colonial Drive turns and Farrow Road begins.

Work begun on this project early in the spring is progressing satisfactorily.

DEDICATION OF FISHER AUDITORIUM

State Park Division

January 15, 1956

On Sunday afternoon, January 15, 1956, the beautiful, spacious and well equipped auditorium-library at the State Park Division was formally dedicated and named The Fisher Auditorium, honoring Dr. Edward Fisher, a prominent physician of Columbia and one of the founders of Trinity Episcopal Church in the city. Dr. Fisher was a member of the original Board of Commissioners, December 1821, authorized to purchase a site for a



FISHER AUDITORIUM—STATE PARK DIVISION, SOUTH CAROLINA STATE HOSPITAL—Dedicated January 15, 1956 Lafaye, Fair, Lafaye & Associates, Architects, Columbia, S. C. Photo by Russell Maxey, Columbia, S. C.

hospital for the mentally ill. The Mills Building, Columbia Division, was the third such hospital in the United States, and he was on the first Board of Regents, January 5, 1828, (now the S. C. Mental Health Commission). Dr. Fisher was born in Virginia in 1774 and died in Columbia in 1836.

This combination building meets a great need at the State Park Division in many ways—until a church building is provided, services will be conducted in the auditorium which will be utilized for patient and personnel activities of many kinds. The library will be of great value. These facilities provide more and better services for the mentally ill.

With a capacity audience this program was carried out:

Presiding—Hon. George A. Buchanan, Jr., Chairman, S. C. Mental Health Commission

Organ Prelude—Mrs. Ethel W. Wilson, Music Director, State Park Division

Processional Hymn—Hospital Choir of Patients

Invocation—Chaplain J. Obert Kempson, Chief Chaplain

Welcome—Dr. William S. Hall, Superintendent, S. C. State Hospital

The Building—Its Purpose and Use—Dr. Sol. B. McLendon, Clinical Director, State Park Division

Introduction of Speaker—Chaplain Collie L. Moore

Dedicatory Address—Dr. J. A. Bacoats, President, Benedict College

Special Music—Hospital Choir of Patients

Act of Presentation—Dr. W. P. Beckman, State Director of Mental Health

Act of Dedication—Chaplain Cato H. Pierson, Former Chaplain, now with Veterans Administration, Roanoke, Va.

DEDICATION BENET AUDITORIUM—HORGER LIBRARY**Columbia Division**

January 29, 1956

Dedication ceremonies for the new Benet Auditorium-Horger Library at the Columbia Division were held at 3:00 o'clock Sunday, January 29, 1956, with former Governor James F. Byrnes delivering the dedicatory address.

Ceremonies included the dedication of the Benet Auditorium with recreational and occupational therapy facilities, and the Horger Library to the expanding services of the South Carolina State Hospital.

The spacious Benet Auditorium, also to be used as a chapel pending the construction of a place devoted to religious activities, is a tribute to Hon. Christie Benet, who was born in Abbeville County, South Carolina, December 26, 1879, and passed away in Columbia on March 30, 1951.

Hon. Benet was appointed a member of the Board of Regents (now the S. C. Mental Health Commission) by Governor Richard I. Manning on April 14, 1915 to succeed his friend, Dr. C. Fred Williams who became superintendent of the S. C. State Hospital on May 1, 1915. With the exception of two short periods, Mr. Benet served on the Board of Regents until his resignation January 9, 1948. Much of this time he was chairman. A nationally prominent attorney and former United States Senator from South Carolina, he had the ability, opportunities and interest to be of great service to others. His community and State benefited by his sympathetic, wise leadership and capable judgment, and none claimed a greater part of his time, interest and devotion than his efforts for the mentally ill of South Carolina. In the Benet Auditorium of the new building will be continued accomplishments for the welfare and happiness of those for whom he worked so long.

It is appropriate that the Horger Library should honor Dr. Eugene Leroy Horger, a staff physician from July 17, 1915 until September 1, 1923 when he became clinical director of the hospital, occupying this position until his sudden passing away on October 22, 1943.



BENET AUDITORIUM—HORGER LIBRARY—COLUMBIA DIVISION, SOUTH CAROLINA STATE HOSPITAL. Dedicated January 29, 1956.
Lafaye, Fair, Lafaye & Associates, Architects, Columbia, S. C. Photo by Russell Maxey, Columbia, S. C.



HORGER LIBRARY—COLUMBIA DIVISION, South Carolina State Hospital. Dedicated January 29, 1956. Lafaye, Fair, Lafaye & Associates, Architects, Columbia, S. C. Photo by Russell Maxey, Columbia, S. C.

This beloved clinical director of the S. C. State Hospital was born in Orangeburg County, near Jamison, April 16, 1889. His life was spent in service for the mentally ill. A pioneer in the South in the promotion of hospital care for the mentally ill, he was keenly interested in every phase of medicine and psychiatry. For years he was an associate professor of clinical psychiatry at the Medical College of South Carolina, Charleston, and many of his articles and editorials referable to mental disorders were published in State and National journals. Dr. Horger was an earnest student, an eminent neuropsychiatrist, a kindly man interested in the individual patient and it is suitable that this beautiful, much needed library bear his name. The building first named for Dr. Horger was renamed the Wilson, honoring former Governor John L. Wilson.

Among those especially recognized and welcomed were: Mrs. Christie Benet and only daughter, Mrs. Porcher P. Hopkins; Dr. George Benet, brother of Mr. Benet and chief surgeon of the hospital for more than thirty years; Mrs. Eugene Leroy Horger, all of Columbia. Also Dr. Eugene Leroy Horger of New York City, only son of Dr. Horger.

This program was carried out:

Presiding—Hon. George A. Buchanan, Jr., Chairman, S. C. Mental Health Commission

Organ Prelude—Mrs. Carolyn M. McLendon, Guest Organist

Special Music—Hospital Choir of Patients, Mrs. Ernestine M. Owen, Director

Invocation—Chaplain William M. Major

Welcome—Dr. William S. Hall, Superintendent, S. C. State Hospital

The Building—Its Purpose and Use—Dr. Lawson H. Bowling, Clinical Director, Columbia Division

Introduction of Speaker—Hon. George A. Buchanan, Jr.

Dedicatory Address—Hon. James F. Byrnes, Former Governor of South Carolina

Special Music—Hospital Choir of Patients

Benediction—Chaplain J. Obert Kempson, Chief Chaplain

Organ Postlude—Mrs. Carolyn M. McLendon

DATA—BUILDINGS

COLUMBIA DIVISION

Talley Building (1904, remodeled 1919), completely renovated and modernized, was again occupied when women patients were transferred from the Blanding Building in September 1955.

Thompson (1936) after being entirely renovated and modernized, was in January 1956 occupied by women patients from various sections of the hospital.

Wilson, John L. (No. Three—1943—enlarged in 1952 to accommodate tubercular men and women patients). Designated the Horger, Dr. E. L. 1954, this was renamed the Wilson in August 1955 when the wing of the Benet Auditorium was designated the Horger Library.

Hon. John L. Wilson, an attorney of distinction, was a member, Board of Commissioners, December 1821, to select and purchase a site for the hospital for the mentally ill. He was a member, South Carolina General Assembly, and Governor of South Carolina 1822-1824.

Taylor (1902-1904—remodeled 1920) for men patients was condemned for occupancy. In October 1954 the patients were transferred to the new buildings, Cooper and Preston. The demolishing of the Taylor Building was completed early in 1956.

STATE PARK DIVISION

On July 18, 1955 two new buildings for the mentally disturbed were occupied at the State Park Division.

Shand (1955) for men is named for the Rev. Peter J. Shand, a member, Board of Regents of the hospital 1842-1857. He was a famous orator and was rector of Trinity Episcopal Church in Columbia for 52 years.

Davis (1955) for men honors Dr. James B. Davis, member, Board of Commissioners authorized to select and purchase a site for the hospital for the mentally ill in 1821. He was the first physician of the hospital 1828-1835.

OPEN HOUSE—STATE PARK DIVISION

On July 6 and 7, 1955 between 9:00 and 11:30 a. m. and from 2:00 to 4:00 p. m., the public was invited to visit the Shand and Davis new dormitories at the State Park Division.

These structures, incorporating the newest and most modern methods for the care and treatment of the mentally ill, provide accommodations for 304 patients, and partially relieve the marked overcrowding at that unit.

A similar Open House was held at the Columbia Division in January 1954 when the four buildings of this type for men and women were completed.

POSITION OF TREASURER

On Monday, June 11, 1956, E. A. Hall, Jr., of Columbia assumed the position of treasurer of the South Carolina State Hospital.

He will also serve in this capacity for the S. C. Mental Health Commission and for the S. C. Mental Health Facilities Building Committee, and as acting treasurer of Pineland, A State Training School.

Mr. Hall was assistant to the Dean of the School of Business Administration, University of South Carolina, prior to accepting the present position.

He succeeded George H. Lucas, Jr., whose resignation, effective April 30, 1956, was accepted with regret when he returned to the office of the S. C. State Auditor as an auditor. Mr. Lucas had been treasurer here since June 16, 1955.

TUBERCULOSIS SERVICE

Dr. Louis G. Karter (Kapauner) continued to devote his entire time to the tuberculosis service of both divisions of the hospital with continuance of intensive treatment of chemotherapy, pneumo thorax, pneumo peritoneum and surgery with very satisfactory results.

	White Men	White Women	Negro Men	Negro Women	Total
Capacity tuberculosis buildings.....	70	70	50	50	240
Census beginning of year.....	58	41	58	43	200
Census end of year.....	61	34	56	46	197
New cases.....	23	11	26	18	78
Admitted for observation.....	17	7	..	..	24
Returned	3	1	..	..	4
Died	11	5	..	6	29
Discharged	3	..	3	2	7
Transferred to other sections of hospital.....	25	17	19	6	67
Trial visit.....	1	4	..	1	6
Arrested cases.....	13	12	127	119	271
Examinations:					
Fluoroscopic	258	86	1,074	962	2,380
Sputum positive.....	13	..	96	56	165
X-ray	82	80	184	73	419
Fluoroscopic examinations—employees.....	..	22	..	..	22

The mobile unit of the South Carolina State Board of Health Division of Tuberculosis made the annual visits to the hospital in August for chest surveys with the results on microfilm. A detailed report was submitted to the hospital for indicated treatment.

	White Men	White Women	Negro Men	Negro Women	Total
Examinations	818	881	1120	1077	3896

ELECTRO SHOCK THERAPY

	White Men	White Women	Negro Men	Negro Women	Total
Markedly Improved.....	....	....	....	14	14
Improved	302	410	247	669	1,628
Unimproved	22	104	117	95	338
Total.....	324	514	364	778	1,980

TREATMENT OF SYPHILIS AND NEUROSYPHILIS

During the year 46 patients were treated for syphilis. Of this number 37 received malaria inoculation with these results:

DOSES	White Men	White Women	Negro Men	Negro Women	Total
Remission .....	...	2	...	...	2
Much Improved.....	7	...	8	...	15
Improved .....	...	...	7	...	9
Unimproved	2	...	6	1	9
Died	1	...	1	...	2
Total.....	10	2	22	3	37

SURGICAL SERVICE

	PATIENTS					EMPLOYEES				
	White Men	White Women	Negro Men	Negro Women	Total	White Men	White Women	Negro Men	Negro Women	Total
Anastomosis .....	..	1	..	..	1	..	..	..	..	..
Anastomosis and excision sigmoid and rectum .....	..	1	..	..	1	..	..	..	..	..
Appendectomy .....	..	7	3	33	43	2	..	..	..	2
Biopsy:										
Basal cell, lip.....	..	..	..	..	..	1	..	..	..	1
Cervix .....	..	2	..	1	3	..	..	..	..	..
Cyst:										
Axilla .....	..	..	..	..	..	..	1	..	..	1
Breast .....	..	4	..	4	8	..	..	..	1	1
Growth:										
Axilla .....	..	..	..	1	1	..	..	..	..	..
Soft palate.....	1	..	..	..	1	..	..	..	..	..
Tongue .....	..	..	1	..	1	..	..	..	..	..
Lesion, head.....	..	1	..	..	1	..	..	..	..	..
Mass, breast.....	..	1	..	..	1	..	..	..	1	1
Mole, foot.....	..	..	..	..	..	1	..	..	..	1
Tumor:										
Breast .....	..	2	..	..	2	..	..	..	..	..
Scalp .....	..	..	1	..	1	..	..	..	..	..
Rectum .....	..	1	..	..	1	..	..	..	..	..
Ulcer, knee.....	..	..	1	..	1	..	..	..	..	..
Blood transfusions.....	30	32	27	22	111	..	..	..	1	1
Bronchoscopy .....	..	..	1	..	1	..	..	..	..	..
Cholecystomy .....	..	1	..	..	1	..	..	..	..	..
Debridement:										
Gun shot wound, chest.....	..	1	..	..	1	..	..	..	..	..
Plaster surgery, contusion, finger...	1	..	..	..	1	..	..	..	..	..
Infection, forehead.....	1	..	..	..	1	..	..	..	..	..
Debridement and closure:										
Pressure sore, buttock.....	..	3	..	..	3	..	3	..	..	3
Dilatation and curettage.....	..	5	..	..	5	..	..	..	..	..
Excision:										
Basal cell, lip.....	..	..	..	..	..	1	..	..	..	1
Cyst:										
Axilla .....	..	1	..	1	2	..	..	..	..	..
Back .....	..	..	..	..	..	1	..	..	..	1
Cheek .....	..	2	..	..	2	..	..	..	..	..
Chin	1	..	..	..	1	..	..	..	..	..
Ear .....	..	..	..	..	..	..	1	..	..	1
Eyelid .....	..	..	..	..	..	..	1	..	..	1
Neck .....	..	..	..	1	1	..	..	..	..	..
Growth, tongue.....	..	1	..	..	1	..	..	..	..	..
Mass, breast.....	..	1	..	..	1	..	..	..	..	..
Mole, hip.....	..	..	..	1	1	..	..	..	..	..
Sarcoma, abdominal wall.....	..	1	..	..	1	..	..	..	..	..
Thyroid .....	..	..	..	1	1	..	..	..	..	..
Tumor:										
Knee .....	..	1	..	..	1	..	..	..	..	..
Parotid gland.....	..	1	..	..	1	..	..	..	..	..
Exploratory laparotomy.....	..	..	1	3	4	..	..	..	..	..
Gastrectomy .....	..	..	1	..	1	1	..	..	..	1
Hemorrhoidectomy	1	2	1	..	4	1	..	..	..	1
Herniorrhaphy	11	3	5	..	19	..	..	..	..	..
Hysterectomy .....	..	1	..	8	9	..	..	..	..	..
Incision and drainage:										
Abscess:										
Abdominal wall.....	..	..	..	1	1	..	..	..	..	..
Arm	1	..	..	..	1	..	..	..	..	1
Finger .....	..	3	..	..	3	1	..	..	..	1
Forearm .....	..	..	..	..	..	..	1	..	..	1
Forehead	1	1	..	..	2	..	..	..	..	..
Hip .....	..	1	..	..	1	..	..	..	..	..
Pelvis .....	..	..	..	1	1	..	..	..	..	..
Thumb	1	..	..	..	1	..	..	..	..	..
Incision and removal:										
Cyst:										
Face .....	..	..	..	..	..	1	..	..	..	1
Forehead .....	..	1	..	..	1	..	1	..	..	1

SURGICAL SERVICE—Continued

	PATIENTS						EMPLOYEES					
	White Men	White Women	Negro Men	Negro Women	Total		White Men	White Women	Negro Men	Negro Women	Total	
Fibrolipoma, thigh.....	..	..	..	1	1	..	..	..	..	..	..	..
Ganglion, foot.....	..	..	..	..	..	..	1	..	..	..	1	..
Piece; steel, wrist.....	..	..	..	..	..	..	..	1	..	..	1	..
Tumor:												
Breast .....	..	..	..	3	3	..	..	..	..	..	..	..
Neck .....	..	..	..	..	..	1	..	..	..	..	..	..
Scalp .....	..	1	..	1	2	..	..	..	..	..	..	..
Injection hydrocortone for bursitis:												
Finger .....	..	..	..	1	1	..	..	..	..	..	..	..
Thumb .....	..	..	..	1	1	..	..	..	..	..	..	..
Intestinal obstruction.....	..	..	..	..	..	1	..	..	..	..	..	1
Ligation varicose veins.....	..	1	..	..	1	1	2	..	..	..	3	..
Lobectomy .....	..	1	..	..	1	..	..	..	..	..	..	..
Mastectomy .....	..	2	..	5	7	..	..	..	..	1	1	..
Para-thyroidectomy .....	..	..	..	1	1	..	..	..	..	..	..	..
Pneu-encephalogram .....	..	..	3	..	3	..	..	..	..	..	..	..
Prefrontal leukotomy.....	..	..	..	1	1	..	..	..	..	..	..	..
Proctoscopy .....	..	8	..	..	8	..	..	..	..	..	..	..
Removal:												
Cyst:												
Cheek .....	..	1	..	..	1	..	..	..	..	..	..	..
Chest .....	..	..	..	1	1	..	..	..	..	..	..	..
Ear	1	..	..	..	1	..	..	..	..	..	..	..
Elbow .....	..	1	..	..	1	..	..	..	..	..	..	..
Growth:												
Tongue	1	..	..	..	1	..	..	..	..	..	..	..
Ingrowing toe nail.....	6	7	..	..	13	..	1	..	..	..	1	..
Mole (electric cautery):												
Breast .....	..	..	..	..	..	..	1	..	..	..	1	..
Cheek .....	..	..	..	..	..	..	2	..	..	..	2	..
Face and neck.....	..	1	..	..	1	..	..	..	..	..	..	..
Plate, frontal bone.....	1	..	..	..	1	..	..	..	..	..	..	..
Polypus, cervix.....	..	..	..	1	1	..	..	..	..	..	..	..
Repair, prolapse rectum and												
anastomosis, sigmoid.....	1	..	..	..	1	..	..	..	..	..	..	..
Salpingectomy .....	..	..	..	1	1	..	..	..	..	..	..	..
Salping-oophrectomy and hysterectomy	..	..	..	1	1	..	..	..	..	..	..	..
Skin graft:												
Axilla (cast).....	2	..	..	..	2	..	..	..	..	..	..	..
Arm (burns).....	..	1	..	..	1	..	..	..	..	..	..	..
Breast .....	..	..	..	4	4	..	..	..	..	..	..	..
Heel	1	..	..	..	1	..	..	..	..	..	..	..
Knee .....	..	..	1	..	1	..	..	..	..	..	..	..
Sterilization .....	..	1	..	36	37	..	..	..	..	..	..	..
Supra pubic lithotomy.....	1	..	..	..	1	..	..	..	..	..	..	..
Suturing laceration:												
Arm .....	..	..	1	..	1	..	..	..	..	..	..	..
Eyelid .....	..	..	1	..	1	..	..	..	..	..	..	..
Finger .....	..	1	1	..	2	..	..	..	..	..	..	..
Knee and leg.....	..	2	..	..	2	..	..	..	..	..	..	..
Lip .....	..	1	..	..	1	..	..	..	..	..	..	..
Lip and mouth.....	..	1	..	..	1	..	..	..	..	..	..	..
Mouth .....	..	..	..	1	1	..	..	..	..	..	..	..
Mouth and jaw.....	1	..	..	..	1	..	..	..	..	..	..	..
Thoractomy .....	..	..	1	..	1	..	..	..	..	..	..	..
Thyroidectomy .....	..	1	..	1	2	..	..	..	..	..	..	..
Transorbital leukotomy.....	..	6	..	61	67	..	..	..	..	..	..	..
Trephine	1	..	..	..	1	..	..	..	..	..	..	..
Ventriculogram .....	..	..	..	1	1	..	..	..	..	..	..	..
Wedge resection, breast.....	..	1	..	..	1	..	..	..	..	..	..	..
Total.....	65	120	49	201	435	13	15	1	4	33		
Obstetrics:												
Caesarean section.....	1	..	..	..	1	..	..	..	..	..	..	..
Spontaneous delivery.....	..	2	2	3	7	..	..	..	..	..	..	..
Total.....	1	2	2	3	8	..	..	..	..	..	..	..

SURGICAL SERVICE—Continued

ORTHOPEDIC SECTION

	PATIENTS						EMPLOYEES					
	White Men	White Women	Negro Men	Negro Women	Total		White Men	White Women	Negro Men	Negro Women	Total	
Amputation:												
Finger	1	..	..	1	2		..	..	..	..	..
Foot .....	..	1	..	..	1		..	..	..	..	..
Leg	2	..	3	..	5		..	..	..	..	..
Application, brace:												
Vertebra, neck.....	1	..	..	..	1		..	..	..	..	..
Traction, neck.....	1	..	..	..	1		..	..	..	..	..
Closed reduction and application:												
Fracture:												
Bandage: finger.....	..	1	..	..	1		..	..	..	..	..
Cast:												
Ankle .....	..	..	..	1	1		..	..	..	..	..
Arm .....	..	3	..	..	3		..	..	..	..	..
Clavicle .....	..	..	..	1	1		..	..	..	..	..
Elbow	1	1	..	..	2		..	..	..	..	..
Femur .....	..	1	..	..	1		..	..	..	..	..
Fibula .....	..	..	..	1	1		..	..	..	..	..
Finger .....	..	..	..	2	2		..	..	..	..	..
Foot	1	1	..	..	2		..	..	..	..	..
Hand	1	..	..	..	1		..	..	..	..	..
Heel .....	..	..	1	..	1		..	..	..	..	..
Humerus	1	4	1	2	8		..	..	..	..	..
Metacarpus .....	..	1	..	..	1		..	..	..	..	..
Radius .....	..	5	..	..	5		..	..	..	..	..
Tibia	4	..	..	1	5		..	..	..	..	..
Tibia and fibula.....	..	1	..	..	1		..	..	..	..	..
Thumb	1	1	..	..	2		..	..	..	..	..
Ulna .....	..	1	1	..	2		1	..	..	..	1	
Ulna and radius.....	1	..	1	..	2		..	..	..	..	..
Vertebra, neck.....	..	..	..	..	..		..	..	1	..	1	
Wrist	2	8	..	3	13		..	..	..	..	..
Splint, metal:												
Thumb .....	..	1	..	..	1		..	..	..	..	..
Crutchfield skull traction for fracture of neck.....	2	..	..	..	2		..	..	..	..	..
Exploratory for previous fracture:												
Hip .....	..	1	..	..	1		..	..	..	..	..
Incision and removal of foreign body:												
Hip .....	..	1	..	..	1		..	..	..	..	..
Injection of Wydase for dislocation:												
Elbow .....	..	1	..	..	1		..	..	..	..	..
Insertion of Kerschner pin for fracture:												
Thumb	1	..	..	..	1		..	..	..	..	..
Open reduction and application, fracture:												
Cast:												
Dislocated finger.....	..	..	..	1	1		..	..	..	..	..
Blade plate fixation:												
Hip	1	2	..	..	3		..	..	..	..	..
Blade fixation and cast:												
Hip .....	..	1	..	..	1		..	..	..	..	..
Prosthesis:												
Hip	4	10	..	2	16		..	..	..	..	..
Open reduction, fracture:												
Femur .....	..	..	..	1	1		..	..	..	..	..
Hip	3	7	..	..	10		..	1	..	..	1	
Removal:												
Pins from hip.....	..	1	..	..	1		..	..	..	..	..
Toe nail.....	..	..	1	..	1		..	..	..	..	..
Reduction and immobilization, fracture:												
Shoulder	2	..	..	1	3		..	..	..	..	..
Sling, fracture:												
Elbow .....	..	..	..	1	1		..	..	..	..	..
Walking cast, fracture:												
Tibia .....	..	..	..	1	1		..	..	..	..	..
Well leg traction, fracture:												
Hip .....	..	1	..	..	1		..	..	..	..	..
Total.....	30	55	8	19	112		1	1	1	..	3	

SURGICAL SERVICE—Continued
UROLOGICAL SECTION

	PATIENTS						EMPLOYEES					
	White Men	White Women	Negro Men	Negro Women	Total		White Men	White Women	Negro Men	Negro Women	Total	
Biopsy, prostate.....	..	..	1	..	1		..	..	..	..	..
Cauterization, bladder.....	1	..	..	..	1		..	..	..	..	..
Circumcision and insertion of catheter..	1	..	..	..	1		..	..	..	..	..
Closure, wound, gangrene of scrotum and flanks.....	..	..	1	..	1		..	..	..	..	..
Consultations	10	7	..	1	18		2	1	..	..	3	
Cystoscopic examinations.....	3	3	..	..	6		1	2	..	..	3	
Debridement, wound, thigh and penis..	..	..	1	..	1		..	..	..	..	..
Exploratory: Retroperitoneal mass.....	1	..	..	..	1		..	..	..	..	..
Urethra	1	..	..	..	1		..	..	..	..	..
Hospital visits.....	141	16	9	..	166		10	11	3	1	25	
Hydrocele .....	..	..	1	..	1		1	..	..	..	1	
Intravenous pyelogram.....	2	1	2	..	5		..	6	1	..	7	
Office visits.....	..	..	4	..	4		42	10	13	..	65	
Orchidectomy	1	..	..	..	1		..	..	..	..	..
Prostatic operation.....	1	..	..	..	1		..	..	..	..	..
Removal, stone, ureter.....	1	..	..	..	1		..	..	..	..	..
Suprapubic drainage.....	1	..	..	..	1		..	..	..	..	..
Transurethral resection.....	3	..	1	..	4		..	..	..	..	..
Total.....	167	27	20	1	215		56	30	17	1	104	
Individual cases.....	78	13	12	1	104		27	13	10	1	51	

SURGICAL SERVICE—Continued
EYE, EAR, NOSE AND THROAT SECTION

	PATIENTS						EMPLOYEES					
	White Men	White Women	Negro Men	Negro Women	Total		White Men	White Women	Negro Men	Negro Women	Total	
EYES:												
Cataract	2	16	14	17	49		2	1	1	2	6	
Chalazion .....	..	1	1	..	2		..	..	1	..	1	
Corneal ulcer	5	17	12	19	53		2	4	3	..	9	
External diseases	18	45	23	17	103		27	49	8	7	91	
Eye ground examinations	865	665	552	466	2,548		1	5	3	4	13	
Foreign bodies removed	1	1	1	2	5		3	..	1	..	4	
Glaucoma	1	9	8	4	22		4	..	..	..	4	
Injuries	8	5	2	2	17		3	4	12	..	9	
Keratitis uveitis	10	18	12	14	54		..	1	12	2	5	
Laryngoscopy .....	..	..	..	1	1		..	..	..	..	..
Naveous eyelid .....	..	..	..	1	1		..	..	..	..	..
Plastic operation, eyelid .....	..	1	..	2	3		..	..	..	..	..
Post operative care	3	3	3	15	24		..	..	..	..	..
Refractions	172	269	30	107	578		56	57	33	39	185	
Repair, laceration, eyelid .....	..	..	..	1	1		..	..	..	..	..
Routine inspections	1,108	1,018	613	630	3,369		104	124	67	64	359	
Slit lamp examinations	4	8	4	3	19		2	2	..	2	6	
Total	2,197	2,076	1,275	1,301	6,849		204	247	121	121	693	
Glasses furnished by the South Carolina State Hospital	31	51	5	20	107		2	3	4	4	13	
EARS:												
Audiometer test	5	12	..	..	17		2	3	..	..	5	
Cauterization, ear polyp .....	..	..	3	..	3		..	..	..	..	..
Cerumen removed	16	8	2	1	27		8	10	1	..	19	
Chalazion .....	..	..	..	..	..		..	..	1	..	1	
Foreign bodies removed	1	3	1	1	6		..	..	..	..	..
Injuries	11	..	1	1	13		1	..	..	..	1	
Irrigations	7	2	1	4	14		6	3	..	..	9	
Otitis externa	19	47	15	11	92		21	43	3	1	68	
Otitis media	34	68	33	24	159		24	45	6	3	78	
Post operative care	3	..	..	..	3		..	..	..	..	..
Routine examinations	1,182	1,091	668	623	3,564		153	192	101	91	537	
Total	1,278	1,231	724	665	3,898		215	296	112	95	718	
NOSE AND THROAT:												
Allergy test	1	1	..	..	2		1	26	..	1	28	
Cauterization, nose .....	..	..	..	..	..		..	2	..	..	2	
Epistaxis .....	..	2	4	..	6		1	3	2	..	6	
Foreign bodies removed	1	..	..	..	1		1	..	..	1	2	
Injuries	1	..	..	..	1		..	..	..	..	..
Laryngitis	3	..	2	4	9		17	17	1	2	37	
Naso-pharyngitis	18	27	13	11	69		26	54	14	3	97	
Peritonsillar abscess	1	2	..	..	3		..	..	..	..	..
Plastic surgery, nose	1	..	..	..	1		..	..	..	..	..
Routine examinations	1,182	1,095	675	624	3,586		161	198	103	104	566	
Sinusitis	15	29	7	10	61		25	51	15	2	93	
Tonsillitis	5	11	5	8	29		11	20	9	5	45	
Tonsillectomies .....	..	..	..	..	..		..	..	1	..	1	
Total	1,228	1,167	706	706	3,758		243	371	145	118	877	

ADJUNCTIVE CLINICAL ACTIVITIES

Laboratory Section

Columbia Division:

There was an increase in work at the Columbia Division. Many new tests were instituted, and new equipment was purchased to improve the laboratory service.

Morris O. Rhoten was added to the laboratory staff as a trainee to fill the vacancy at the State Park Division.

State Park Division:

With the steady increase in work and the addition of Pine-land's laboratory work, the overall laboratory work at the State Park Division was greatly increased. This necessitated an addition of new equipment, and the building of tables and cabinets.

The consolidated monthly reports for the fiscal year 1955-1956 are as follows:

Total examinations..... 59,681

	<i>Columbia Division</i>	<i>State Park Division</i>	<i>Total</i>
Bacteriology			1,790
Cultures	593	17	
Smears	432	535	
Sputum concentrates		3	
Bacteria count (milk)	210		
Chemistry			7,669
Glucose	3,057		
Bromides	1,697	4	
Non-protein nitrogen	1,484		
Creatinine	79		
Urea nitrogen	273		
Total protein (blood)	37		
Total protein (spinal fluid)	761		
Icterus index	71		
Van den bergh	16		
Chlorides	1		
Cholesterol	8		
Gastric analysis	18	7	

P.S.P.	4	-----	-----
Calciums	1	-----	-----
Uric acid	1	-----	-----
Butter fat	80	-----	-----
Urobilinogen	8	-----	-----
Cephalin-flocculation	5	-----	-----
Prothrombin time	7	2	-----
A/G ratio	35	-----	-----
C. O. ² combining power	4	-----	-----
Glucose (spinal fluid)	3	-----	-----
Spinal fluid (sugar)	3	-----	-----
Spinal fluid (chloride)	3	-----	-----
Hematology	-----	-----	30,131
R. B. C.	437	26	-----
W.B.C. (blood)	3,493	1,982	-----
W.B.C. (spinal fluid)	204	531	-----
Hgb.	3,503	2,068	-----
Differential count	3,499	1,963	-----
Bleeding time	1	6	-----
Coagulation time	1	5	-----
Sedimentation rate	4,025	2,111	-----
Hematocrit	4,126	2,133	-----
Bone marrow	-----	1	-----
Sickle cell	-----	7	-----
Reticulocyte count	-----	1	-----
Spinal fluid differential	-----	2	-----
Platelet count	1	3	-----
Clot retraction time	-----	2	-----
Parasitology	-----	-----	5,246
Blood (feces)	33	14	-----
Ova and parasites	3,135	2,037	-----
Malaria	2	5	-----
Enterobus preparation	-----	6	-----
Lugol stains	-----	13	-----
Mucus	1	-----	-----
Urinalysis	-----	-----	6,184
Complete (color, reaction, sp. gr., sug., alb. micro)	3,974	2,065	-----
Acetone	97	31	-----

Blood		5	
Bile	4	5	
Diacitic acid	1	2	
Serology			8,650
Flocculation (blood).....	2,860	2,084	
Flocculation (spinal fluid).....	750		
Complement fixation (blood).....	292		
Complement fixation (spinal fl.).....	753		
Colloidal gold	737	23	
Type and Rh	375	244	
Cross match	358	171	
Agglutinations	2		
Heterophile antibody	1		
Ascitic Fluid			3
Cell count		1	
Differential		1	
Specific gravity		1	
Autopsies			8
Complete	3		
Partial	5		
Totals	41,564	18,117	
Grand Total			59,681

X-RAY SECTION

	White Men	White Women	Negro Men	Negro Women	Total
Abdomen	7	23	8	32	70
Ankle, (left)	12	17	18	15	62
Ankle, (right)	4	31	6	2	43
Chest, (P. A.)	1,204	1,167	925	978	4,274
Colon,	10	23	9	7	49
Elbow, (left)	18	9	2	4	33
Elbow, (right)	4	23	2	4	33
Femur, (left) .....	..	..	..	..	2
Femur, (right)	2	..	..	..	2
Foot, (left)	8	19	10	6	43
Foot, (right)	2	15	2	4	23
Gall-bladder	9	27	..	7	43
Hand, (left)	38	39	4	12	93
Hand, (right)	31	16	16	10	73
Hip, (left)	36	59	5	7	107
Hip, (right)	26	50	5	5	86
Humerus, (left)	26	22	4	7	59
Humerus, (right)	23	41	10	13	87
Jaw, (left)	2	3	2	2	9
Jaw, (right)	4	..	..	..	4
Kidney, Ureters, Bladder	32	28	12	1	73
Knee, (left)	10	7	6	3	26
Knee, (right)	14	16	4	4	38
Leg, (left) .....	..	2	4	..	6
Leg, (right) .....	..	..	2	5	7
Nose	3	3	..	..	6
Pelvis .....	..	10	2	4	16
Pregnancy .....	..	1	..	1	2
Ribs, (left)	3	4	..	2	9
Ribs, (right)	4	5	1	1	11
Sinuses	6	12	..	..	18
Skull	118	58	114	86	376
Spine, (cervical)	18	15	18	3	54
Spine, (lumbar)	17	99	16	6	138
Spine, (thoracic)	6	66	10	2	84
Stomach	74	58	27	22	181
Ventriculogram .....	..	..	..	1	1
Wrist, (left)	13	23	4	10	50
Wrist, (right)	8	27	6	10	51
Total X-ray Exposures	1,792	2,020	1,254	1,276	6,342
Basal metabolism rate	2	3	..	..	5
Electrocardiogram	48	51	6	11	116
X-ray treatment (superficial)	12	6	13	..	31
X-ray treatment (deep therapy) .....	..	31	4	23	58
GRAND TOTAL	1,854	2,111	1,277	1,310	6,552

ELECTROENCEPHALOGRAPHY SECTION

	White Men	White Women	Negro Men	Negro Women	Total
Electroencephalograms	84	51	46	31	212

DENTAL SECTION

	White Men	White Women	Total	Negro Men	Negro Women	Total
Anesthetics	1,030	783	1,813	1,899	1,729	3,628
Biopsies .....	....	....	....	1	....	1
Bridges:						
Repaired	1	2	3	1	....	1
Reset	1	....	1	....	....	....
Dentures						
Adjusted	46	35	81	2	....	2
Duplicated and relined	2	2	4	....	....	....
Made	28	24	52	1	....	1
Partial made.....	1	....	1	2	....	2
Repaired	8	31	39	....	....	....
Fillings:						
Alloy	34	55	89	3	5	8
Cement	1	1	2	....	....	....
Plastic	3	6	9	....	....	....
Porcelain	23	51	74	....	....	....
Reduction and fixation of dislocated mandible.....	1	....	1	....	1	1
X-ray exposures	29	52	81	50	51	101

PHARMACY

During the past fiscal year the over-all work performed by the pharmacy continued on the upward trend, with the following prescriptions filled:

Columbia Division	29,573
State Park Division	22,434
Pineland, A State Training School.....	657
(since February)	
Total.....	52,664

The Columbia Division showed a large increase of 6,604 prescriptions. The State Park Division had a decrease of 3,545 prescriptions which was due partially to the establishment of separate records in February for Pineland, a State Training School, which had previously been combined with State Park.

The over-all increase was attributed to the increase in the patient census and to the greater number of drugs stocked, especially of the ataratic type being used by all services.

Continued cooperation was given the nursing service training program by lecturing to classes of aides at both divisions of the hospital.

During July and August part time assistance was rendered by a University of South Carolina pharmacy student.

On September 12, 1955 Miss Betty M. Fuller of Laurens, S. C., graduate, School of Pharmacy, University of South Carolina, became the first full time assistant pharmacist. On March 31, 1956 she left for another position in Winston-Salem, North Carolina.

On June 2, 1956 Herman W. Daniel of Columbia, assumed his duties as full time pharmacist after receiving on June 1, 1956 his Bachelor of Science Degree in Pharmacy from the University of South Carolina. For several months in 1954 he was a student assistant in the hospital pharmacy.

Mrs. Myrtle E. Mackey, R. Ph., chief pharmacist, was on May 10, 1956, in Columbia, elected second vice-president of the Fifth District Pharmaceutical Society for the ensuing year.

NURSING SERVICE

The activities and responsibilities of the nursing service at the Columbia and the State Park Divisions continued to increase by reason of the expansion of the recreational, occupational and library programs, as well as the services rendered by the church volunteer groups.

The assignment of physicians to designated units afforded opportunities for greater service, and the administration of newer therapy and medication.

There was every evidence of interest and cooperation in efforts toward advancement with more appreciation and understanding of the services rendered the patients.

The value of the intensive psychiatric orientation course of 56 hours, initiated September 1953, continued to be reflected in more efficient care of the patients and a clearer understanding of duties and responsibilities. The course conducted by members of the medical staff and representatives from various sections of the hospital was attended by psychiatric aide personnel of both divisions, with certificates of completion awarded by Dr. Hall.

Group No.	Course Began	Course Ended	Men	Women
Columbia Division..... 5	Sept. 13, 1955	Jan. 25, 1956.....	20	34
Columbia Division..... 6	Feb. 15, 1956	May 24, 1956.....	43	42
State Park Division..... 5	Sept. 7, 1955	Dec. 21, 1955.....	16	23
State Park Division..... 6	Feb. 7, 1956	May 18, 1956.....	21	29

The nursing service personnel and the affiliate student nurses assisted with the many activities and programs throughout the

two divisions, such as the dedication of the Benet Auditorium—Horger Library at the Columbia Division; the Fisher Auditorium at the State Park Division; Clinic Day for psychology students from South Carolina colleges and universities; Open House during Mental Health Week, and also conducting various groups through the hospital.

There were two general meetings with the superintendent, Dr. William S. Hall, for impressing upon each the necessity for complying with traffic regulations on the hospital grounds for the protection of patients and property, as well as for personal safety.

Every encouragement was given the personnel to attend meetings and lectures of interest and to see films of value in their activities.

During the five day refresher course, March 5-9, 1956, sponsored by District No. 3, S. C. State Nurses' Association held in the Benet Auditorium, the director of nursing service was on the arrangements committee. The all-day Institute at the S. C. Sanatorium on March 9, 1956 was attended by two registered nurses in charge of the Wilson Building (for tubercular patients), Columbia Division. With one of the supervisors, the director of nursing service attended the American Nurses' National Convention in Chicago, May 12-18, 1956.

Several of the nursing staff participated in professional groups and attended the annual Convention, S. C. State Nurses' Association, Charleston; the Mental Hygiene Society and Social Workers Conference; and quarterly district meetings, S. C. Nurses' Association.

NURSING EDUCATION SERVICE

During the year 1955-1956 four classes of student nurses completed the affiliate course offered by the South Carolina State Hospital. These are represented in the following chart:

Group	Began	Ended	Number of Students	Hospitals Represented
21	July 4, 1955.....	September 25, 1955....	64	11
22	October 3, 1955.....	December 25, 1955....	64	11
23	January 2, 1956.....	March 25, 1956.....	61	11
24	April 2, 1956.....	June 24, 1956.....	66	11
Total.....			255	

Each of the above groups remained for 12 weeks, during which each was given approximately 110 hours of theory and 84 hours of clinical experience. The real importance of this program lies in the role played in helping the student nurse acquire a better understanding of human relationships and how to apply that knowledge to general nursing.

On many occasions the Army Nurse Corps officials at Fort Jackson invited the affiliate student nurses and supervisory personnel to various activities there. Each class attended a luncheon in the Fort Jackson Hospital and then toured the Post as the personal guests of the Commanding General and the nursing staff.

The nursing education service personnel and the current class of affiliate student nurses attended several meetings of the South Carolina State Nurses' Association in Columbia October 11-14, 1955.

Personnel and affiliating student nurses assisted the nursing service in conducting visitors through the hospital, giving information and serving as hostesses during the annual Open House at the hospital; during State-wide Clinic Day for psychology students in South Carolina colleges and universities; and when student nurses from the University of Georgia School of Nursing, Augusta, and from the S. C. Baptist Hospital, Columbia, visited here.

Assistance by teaching and cooperation were given these activities:

Orientation course for psychiatric aides at the Columbia and the State Park Divisions; orientation for church volunteer workers; psychology seminars; clinical pastoral training program; forum for medical staff and chiefs of medical auxiliary services; study group referable to "Small Group Dynamics" and with the alcoholic program by weekly showing and discussing films with each group.

On June 4, 1956 a State-wide meeting of directors of South Carolina Schools of Nursing was held in Columbia at the Jefferson Hotel to discuss still further the problems of accreditation. With great pride was received the information that student nurses in South Carolina in their National Board examinations for registration make their highest grades in psychiatry.

The director served as senior advisor to the South Carolina State Student Nurses' Association; and each month participated in the S. C. State Board of Health In-Service Education Program for Supervisory Nurses and Consultants referable to mental health conducted under the leadership of Miss Katheryn Fritz, R.N., United States Public Health Nurse Consultant, Atlanta, Georgia.

Many talks were made by the director to clubs and organizations within the State on some phase of the mental health program and activities of the nursing education service.

Special Activities

On March 1, 1956 the director appeared on Miriam Stevenson's television program to publicize the graduate nurses' refresher course, sponsored by the Third District South Carolina State Nurses' Association and held at the S. C. State Hospital March 5-9, 1956, with more than a hundred nurses attending each meeting on their time off duty; and with student nurses assigned special meetings to attend. Early recognition and the prevention of mental illness were stressed, and the program was considered very successful.

The director was given military leave to attend an Institute on Nursing Service Administration at Brook Army Medical Center, Fort Sam Houston, Texas, April 9-22, 1956.

On May 14-15, 1956 there was participation in the Southern Region Conference for Traffic Safety at Miami Beach, Florida, one of four such meetings implemented by President Dwight D. Eisenhower to expedite the development of organized citizen support for proven methods of accident prevention. Participation is by invitation only, and the educational director was invited because of being president of the Columbia Altrusa Club.

On May 19, 1956 she attended Nursing Bulletin Editors Conference in Chicago. Awards in Biennial Bulletin Awards Competition for State Nurses' Associations were presented by Arthur Hall, vice-president and general manager, Chicago Daily News, at a luncheon given by the American Journal of Nursing Company.

"South Carolina Nursing," a magazine in this State, received first honorable mention for a news feature story on the Greenwood County Health Center.

On May 28, 1956 the director attended a conference of the nursing faculty at the School of Nursing, Medical College of South Carolina, in Charleston. The special guest was Miss Marion Miller from New York, consultant for the National League for Nursing, visiting various schools of nursing to assist with problems pertaining to securing full accreditation by the National League for Nursing.

Miss Miller complimented the program for student nurse affiliates at the S. C. State Hospital, and in view of this fact, as well as many others, the director submits these recommendations, the effecting of which should give greater depth and stability to the current scope of the educational program and thereby foster the chances of gaining accreditation for our own hospital.

Recommended that:

1. As soon as feasible a similar program be arranged at the State Park Division for Negro student affiliate nurses.
2. A competent clinical supervisor be added to the staff to insure better supervision of students on hospital wards.
3. More effective communication between the S. C. State Hospital and the home schools for continuity in learning experiences and preparation of the student for this particular aspect of nursing education.
4. All affiliating schools send a representative group to this hospital annually to evaluate the program from the standpoint of teaching facilities, learning experiences, and the social life of the student nurse.
5. For the graduate nurses a week of orientation to be held annually at the hospital.
6. The director of nursing education to visit the eleven affiliating schools more frequently to insure that the school personnel has a better understanding of the total educational program offered here.
7. A competent psychiatric nursing instructor so the director may have more opportunities to carry out these recommendations.

Clerical work in this service has become increasingly heavy.

Four sets of evaluations for each student must be prepared in triplicate and mailed to the home school. Numerous transcripts and letters of recommendation must be prepared and mailed. Many questionnaires must be completed. A very lengthy and important one was recently prepared to accompany the application of the Greenville General Hospital School of Nursing for accreditation by the National League for Nursing. Many more such requests are anticipated.

PSYCHIATRIC SOCIAL WORK SECTION

The social service section was organized January 1, 1922 as an auxiliary service to the medical staff.

This report covers the activities of the unit at the State Park Division as well as at the Columbia Division.

The duties of the social worker are varied and can best be described in this manner:

Histories: Often the medical staff needs additional information to aid in reaching a diagnosis and determining therapy, which necessitates the social worker visiting the community and interviewing relatives, family physician, former employer and others. Family and personal histories and a detailed account of the onset of the mental illness are secured. During the past year 1086 such histories were secured.

Interim histories: When a patient was returned to the hospital attempts were made to secure information referable to adjustment in the community and the factors which precipitated the necessity for further hospital care. There were 132 interim histories secured.

Special investigations: Histories were secured with regard to all Court and penitentiary cases committed for observation. Such cases required thorough and careful investigations which were time consuming.

Pre-trial visit investigations: Efforts were made to arrange satisfactory plans for the return to the community of patients who had difficulties in the home situation or perhaps no relatives in a position to take them out of the hospital. Local agencies and the Vocational Rehabilitation Division, S. C. Department of Education, were helpful in some instances. As-

sistance was given in 52 of the 66 pre-trial visit investigations made.

Follow-up visits: In a limited number of cases contact was maintained with the patient after returning home. Interviews with the patient and the family often brought about a better understanding of problems and relief from tensions. Referrals were made to local clinics and other sources of help. During the year 20 patients were assisted.

Work in the hospital: As many new patients as possible were visited shortly after admission and given information pertaining to the hospital which would alleviate misconceptions and any apprehensions as to care and treatment. Efforts were made to impress the patient with the feeling that the social worker is a friend interested in his welfare and is a link between the hospital and the community. There were 1288 such interviews.

A social worker was on duty in the hospital from 8:30 until 5:00 p. m. every week day and every Sunday morning to give information referable to the treatment and progress of the patients; and to arrange for interviews with the physicians when necessary. Probably one of the greatest services rendered was that of being "a good listener". Every endeavor was made to alleviate anxieties and to impart some understanding in regard to mental illness. Assistance was also given in interpreting the policies of the hospital and the services available. There were 8107 interviews with relatives, 2321 local telephone calls and 496 long distance calls with reference to patients.

Educational activities: Talks were made to each group in the psychiatric orientation course for psychiatric aides, to others in the hospital, and occasionally to lay groups in the community.

The social worker at the State Park Division conducted school and college groups through that unit and conveyed information relative to the hospital generally.

Appreciation is expressed to State-wide agencies, county and city officials and others for assistance and cooperation.

CHURCH BUILDING FUND

The fund for the proposed church building at the Columbia Division, initiated by white patients in November 1943 with additional contributions since then from them, from relatives,

friends and organizations, has gradually increased to more than \$60,000.00. This amount was made possible by matching the \$30,000.00 appropriation of the General Assembly. There have been very few gifts for this fund during the past year.

The well equipped Benet Auditorium at the Columbia Division and the Fisher Auditorium at the State Park Division with easy access enabled many more patients to attend church services. The small auditorium in the Williams Building, Columbia Division, served as a chapel for patients there.

These facilities meet a great need, but there still exists a necessity for an adequate structure devoted to religious services at both the Columbia and the State Park Divisions.

CHAPLAINCY SECTION

Pastoral Ministry:

A well established program of pastoral visitations afforded more opportunities to contact patients and for interviews with the increased number who requested counseling. Referrals from other sources included the family physicians, hospital medical staff, community clergy, nursing personnel, family members and friends. A grand total of 15,208 contacts were with patients. These consisted of interviews with newly admitted patients, intensive follow-up interviews, visits with the seriously ill and others as needs indicated. There were 365 contacts with relatives of patients. Sick employees received 758 visits.

Ministry of Worship:

The completion and occupancy of the Benet and Fisher Auditoriums enabled many more patients to attend worship services, constituting one of the main chaplaincy activities. Services were conducted each Sunday and on special occasions at which 279 sermons were delivered. On wards where patients were unable to participate in the Sunday services 653 worship periods were held, occasionally augmented with audio-visual aids.

In the various chapels and on numerous wards there were services appropriate to Easter, Thanksgiving and Christmas. A beautiful Christmas pageant was presented by 41 patients at the Columbia Division.

Teaching Ministry:

The limited chaplaincy staff was unable to comply with the many requests from community clergy, theological students and ministers in other sections of the country to participate in the program of clinical pastoral training. There is more awareness than ever for more adequate preparation for better pastoral care, and there are splendid opportunities here to develop a more effective program.

During the past year nine theological students and ministers participated in the clinical pastoral training program which for several years has been jointly sponsored by the hospital and the Council for Clinical Training, Inc., New York City.

In cooperation with and accredited by the Lutheran Theological Southern Seminary Columbia, S. C., a new course in this field of training was offered to community clergy. Five completed such training.

Community Relationships:

During the year the church volunteer service program, initiated by the superintendent through the chaplaincy section, was transferred when the full time director of volunteer services assumed her duties. Churches continued their splendid interest and participation in the social and spiritual life of the patients through fellowship and gifts.

Devotional booklets and materials were provided by churches of Columbia and vicinity.

Ministers of various faith groups from throughout the State frequently visited their parishioners.

Numerous requests were made for the chaplains to participate in discussion groups referable to activities here, as well as to mental health and the relationship to religion.

Personnel Changes:

The Rev. Cato H. Pierson, chaplain, State Park Division since March 17, 1954, resigned, effective October 21, 1955, to become chaplain at the Veterans Administration Hospital, Roanoke, Virginia.

He was succeeded by the Rev. Collie L. Moore on October 25, 1955. A graduate of Clark College, Atlanta, Georgia, with an A.B. degree, and of Gammon Theological Seminary, Atlanta, with a B.D. degree, Rev. Moore was pastor of several churches and supply chaplain at the Veterans Administration Hospital, Tuskegee, Alabama. Prior to coming here he was pastor of Bowen Methodist Church, Tuskegee Institute, Alabama.

The Rev. Alonzo W. Harley, part time chaplain, State Park Division, since October 1, 1954, was transferred on February 14, 1956 to the position of chaplain and recreational aide at Pineland, A State Training School, when the permanent buildings were occupied.

LIBRARY SECTION

With the occupancy of the new Horger Library Building at the Columbia Division and the library quarters in the new Fisher Auditorium at the State Park Division the scope of activities of the library section was greatly expanded.

The library program for patients has a three-fold purpose: educational—to serve as a source of information; diversional—a source of gratification and pleasure; therapeutic—to help the patient identify himself with a social group, such as book review and general discussion clubs and patient committees.

The therapeutic function of library service has particular significance, since mental patients have basic need for identification with others, for development of group spirit, and opportunity for working together toward a common goal.

Library Service to Patients:

During the year 1273 individual patients borrowed reading material or visited the libraries to use material in the libraries. Circulation totaled 24,621.

Periodicals were distributed to 68 wards of the two divisions. A total contribution of 48,673 periodicals made this service possible.

The library purchased 375 books and 105 were added to the collection through contributions.

A group of 7 patients rendered valuable service by performing such routine as filing, shelving books, keeping circulation records, sorting contributed periodicals, processing and repairing books.

Educational films and travelogues, totaling 18, were used in the monthly meetings of the library club.

A patient committee assisted in selecting and editing material for the library section of the hospital newspaper.

Medical Library:

During the year 56 books and 19 journal subscriptions were purchased. Circulation totaled 684 and there were 183 individual borrowers.

The librarian made talks to each group in the orientation course for psychiatric aides and to students in the clinical pastoral training course referable to the therapeutic use of reading material.

The generosity of the many interested individuals, church and other groups in supplying the library with periodicals is greatly appreciated.

RECREATIONAL THERAPY SECTION

COLUMBIA DIVISION

The recreational therapy section at the Columbia Division, composed of a director and volunteer patient aides, assisted by affiliate student nurses assigned bi-monthly, provided a varied program of activities for the pleasure, relaxation and social rehabilitation of the patients.

Affiliate nurses attended weekly classes where recreational therapy and the attributes of leadership were stressed.

On December 11, 1955 this section moved into the beautiful, new Benet Auditorium equipped with spacious and splendid facilities. The large stage with several dressing rooms adequately provide for entertainments of many types. The several ramps affording easy entrance, and the seating capacity of 525 enable many more patients to engage in the various activities. The easily removed and stored seats release ample space for dances and other entertainments. The screen and scenery are electrically operated.

In the auditorium two combination high fidelity record players and broadcasting consoles permit broadcasting from the stage and from the studio throughout the Columbia Division.

Three microphones, an electric Hammond organ, an Everett concert grand piano and two additional pianos complete the equipment.

With one of the pianos and musical instruments already in the hospital a music room was arranged for the patients and former musicians encouraged to use the facilities.

"Palmetto Variety" has developed from a small magazine June 1954 into large newspaper edited, typed and assembled by patients with the director as editor. This newspaper is distributed throughout the United States to many mental hospitals, to chairmen of church volunteer groups and other interested individuals, as well as throughout the entire hospital.

By invitation the recreational therapy director was on a panel at the Conference, National Association of Recreational Therapists in Athens, Ohio, in March 1956, to discuss "Recreation for the Aged in Mental Hospitals."

SUMMARY OF ACTIVITIES

Soon after occupying the Benet Auditorium a club for those of 60 years and over was possible because of conveniently located ramps. "Club 60" for the "Dapper Dans" and the "Gibson Girls" is increasingly popular.

The dance program included 115 ballroom, folk and square dances which greatly aided in the development of initiative and courage, and in overcoming timidity of patients.

In the Benet and the Williams auditoriums, and on many wards with patient volunteer projectionists, there were 361 selected movies. The twice a week movies in the auditoriums were preceded by request programs, musical quizzes, musical travelogues, "Stop the Music" games, etc.

Columbia radio stations cooperated by sending advance monthly programs making possible a wide range of entertainment, lectures, symphonies, etc.

The many TV sets throughout the hospital, with seven more secured during the year, afforded diversion and pleasure.

Four hospital-wide variety shows were promoted in the Benet Auditorium, where were also held many bingo parties, with numerous others on the wards. Competitive groups, especially

for those unable to participate in active games, made bingo more interesting. There were 333 such games.

Table games of cards, checkers, jigsaw puzzles, etc., were in constant operation in the dayrooms and in the "play spots" on the grounds. Pool continued to be enjoyed on three wards.

Outdoor sports included croquet, volley ball, horse shoes and goal back. Civic, commercial and church teams from the Columbia Softball League played the patient teams 27 times on the home field. Groups of personnel, interns and ministerial students provided continuous opposition for the patient teams throughout the summer.

A daily program of selected music was broadcast to wards, on the grounds, in dining halls and to assembled audiences in auditoriums.

Highlights of seasonal festivities were the Halloween Cabaret dance in the women's dining hall with about 800 attending. A floor show by patients, the young women in formals, two cake walks and talent from WCOS TV station were extra features. The Christmas dance music was contributed by an orchestra of the Columbia Federation of Musicians, Local 21, American Federation of Musicians, led by Professor Ben A. Gardner. The dining hall and the Benet auditorium were gaily decorated for both occasions, and refreshments were served at the Halloween dance.

Christmas decorations were ordered and distributed by this section to the Columbia and the State Park Divisions. After the holiday each ward supply was inventoried and returned for recreation storage.

The Columbia College choir presented a delightful concert, and there were three one act plays by the Dramatics Department, University of South Carolina.

There is still need for a station wagon for transportation of workers and equipment; a grand stand for the athletic fields; and additional softball area; and a swimming pool.

STATE PARK DIVISION

The well equipped new Fisher Auditorium occupied early in January 1956 permitted expansion of activities with Leon M. Elam as director of recreational therapy. The diversified pro-

gram provided wholesome relaxation and entertainment for both active and passive patients.

For those engaged in details and unable to attend regularly scheduled programs, there was a weekly movie on Thursday afternoon at five o'clock in the Fisher Auditorium, and a dance every Saturday morning at which refreshments were served.

Every Wednesday at the dance patients having a birthday during the week were given special recognition.

Bingo every Tuesday was enjoyed; and movies were shown in the auditorium every Thursday and on alternate Mondays.

Softball teams of patients afforded entertainment for many; and a group of all stars from the various groups engaged the psychiatric aide teams with good results.

Two games a week were played by the personnel teams, a number of games being with teams from Columbia and Little Leagues.

Two talent shows were presented, featuring variety acts by patients from the various buildings.

In keeping with the policy to have as much live entertainment as possible there was presented "Four Keynotes—Sammy Cook and His Band in Gala Rhythm and Blues Show", enjoyed by over 600 patients.

On Monday, February 20, 1956 in the Fisher Auditorium appeared the internationally known Massie Patterson and her equally famous Carib Singers in a Calypso Carousel. This group of native singers, dancers and musicians are organized to bring to Americans the great, but neglected folk music of the Caribbean Island.

A dance contest featured the annual Halloween dance in the old recreational hall with most of the patients in costume. Favors were given, and refreshments served.

At Thanksgiving was a gala festival, including a 50 car parade through the hospital grounds for the enjoyment of all patients. Allen University band furnished the music for the parade and during the coronation of the State Park Division patient queen, who with her attendants rode on a decorated float. The Booker T. Washington intra mural football game was played.

Many ward parties were held during the Christmas holidays, and each patient received at least one gift, due to the generosity

of individuals and church groups. Wards and the recreational hall where the Christmas dance was held were beautifully decorated.

A number of radios and several TV sets afforded diversion and pleasure.

Games of cards, checkers, puzzles, etc. were provided for those not interested or able to participate in other activities.

OCCUPATIONAL THERAPY

The occupational therapy section moved into the new quarters in the Benet Auditorium in January 1956 where there are facilities for expansion of activities with many more patients and in more areas of the hospital.

Interest in occupational therapy in the Allan and Saunders Buildings, Columbia Division, continued with an increased number of patients participating.

With the new equipment more and improved work was done by the men with the popular woodworking. Ceramics continued very popular with men and women, and some of the products were in the professional group.

The section had an exhibit at the YWCA Craftsman Fair from which six of the ceramic pieces made by patients were selected for exhibition at the Columbia Museum of Art for a month.

The hospital was kept supplied with "throw rugs", and every two weeks four dozen bedroom slides were completed for ward use.

The watch making and repair project proved well worthwhile for both patients and the hospital personnel.

A small garden of vegetables and flowers for a group in this section provided occupation and enjoyment.

On tour through the hospital many visitors had an opportunity to go through this section.

At the State Park Division occupational therapy activities are limited, but plans are in process for expansion.

PSYCHOLOGY SECTION

There was marked progress in the psychology section during the year with the securing of additional psychologists with diversification and extension of their professional activities.

With the increased personnel and immediate prospect of other psychologists, facilities underwent reformulation to comply with the standards of the American Psychological Association which require supervision in psychotherapy, staff participation and other inter-disciplinary functions. Activities to be stressed are: (a) psychotherapy; (b) intern training; (c) research in treatment services; (d) recruiting; (e) hospital teamwork; (f) in-service and affiliate nurse education; (g) State Park Division service and plans; and (h) professional associations.

(a) Group psychotherapy was begun in earnest on the model ward.

(b) Two clinical psychology interns received special training and have since secured their doctoral degrees:

Dr. Melvin Drucker, George Peabody College, Nashville, Tenn., was here from July 1, 1955 until June 30, 1956 when he became associated with the Atlanta Child Guidance Center, Atlanta, Georgia.

Dr. Wallace A. Kennedy, Florida State University, Gainesville, Florida, came July 1, 1955 and is expected to leave July 20, 1956 for a position at the Wellesley Human Relations Project, Harvard Medical School, Boston, Mass.

(c) A request for a "research and development" grant of \$40,000.00 from the National Institute of Mental Health is being made on the basis of plans formulated by the medical staff of the Columbia Division and the psychology section. With the psychiatric supervision of Dr. William G. Morehouse, a senior assistant physician, women's service, Columbia Division, the psychology personnel continued efforts toward the development of a range of therapeutic and research services on a "model" ward in the Saunders Building. Personnel from all sections are cooperating in what is expected to be an integrated project of great value. The research is designed to assess the effectiveness of a variety of activities on the "model" ward—a ward designed as a "rehabilitative" social system giving optimal opportunity for remotivation, resolution of deep emotional conflicts, and growth in general, as compared to the effectiveness of a customarily custodial ward. This research is not an "ivory tower" of curiosity, but rather is an essential practical service function to guide development of treatment services along the most rewarding lines of efforts.

(d) An agreement was made for cooperation with the University of South Carolina where the hospital psychologists are on the faculty. Dr. Elmore A. Martin, chief psychologist, and Dr. Boris Gertz are now occupying such positions and other psychologists expected, Dr. Malcolm D. Gynther and Mrs. Gynther, Duke University; and Dr. Donald J. Mason and Dr. Donald W. Stilson, University of Illinois, will likewise be on the University faculty. Plans continued for the University to use the hospital practicum facilities for improving psychological education and for motivating more students into this field.

(e) The psychology personnel played a part in developing a closer sharing of ideas within the hospital, and plans to contribute more in this regard. With nursing service collaboration, a few "ward conferences" were held on the model ward to encourage psychiatric aides and nurses in the development and execution of treatment duties. With the clinical directors from both divisions a forum was instituted for discussion and formulation of common goals for the various services, and for agreement as to ways of attaining such goals.

(f) Cooperation was continued with the medical staff in the therapy program for alcoholic patients. Lectures were given to junior medical interns at the hospital during the summer; to ministerial students; affiliate student nurses and psychiatric aides in the orientation course at the Columbia and the State Park Divisions.

(g) A psychological project for the State Park Division was begun with some diagnostic and treatment services rendered. A study of special Negro problems is planned with the hope of securing funds to subsidize more clinical work in diagnosis, treatment and follow-up rehabilitation efforts.

(h) The use of hospital facilities as a training center for psychology interns, with the goal of accreditation, is being encouraged. As stated in last year's report, doctoral programs in clinical psychology are being offered. This is a cooperative training endeavor of three locales initiated July 1, 1955 by the South Carolina State Hospital, the Richland County Mental Health Clinic, and the office of the Director, Community Services, S. C. Mental Health Commission. The University of South Carolina definitely plans to continue using the hospital facilities for improving psychological education. Liaison with several nearby univer-

sities is planned. Chairman Waskom, Psychology Department, Florida State University, has visited this hospital and indicated interest in internship training for doctoral students. It is hoped there will be such liaison with Duke University, the University of North Carolina, the University of Tennessee and the University of South Carolina. This would afford benefits to both the hospital and the students.

The annual Clinic Day for psychology students from colleges and universities throughout the State was held April 20, 1956. An excellent program prepared under the direction of Charles H. Preshers of the psychology staff, incorporated personnel from nearly all sections of the hospital.

On November 10, 1955 Dr. Dale S. Higbee, psychologist here since July 15, 1954, left to accept a similar position at the Veterans Administration Hospital, Salisbury, North Carolina.

On July 28, 1955 Dr. Carl A. Bramlette, Jr., chief psychologist, who had been with the hospital since November 3, 1952, resigned to become chief psychologist with the Richland County Mental Health Clinic.

From December 7, 1955 until March 26, 1956 Charles H. Preshers was acting chief psychologist.

On March 26, 1956 Dr. Elmore A. Martin assumed the position of chief psychologist. A native of South Carolina, he received his B.S. degree at the University of South Carolina, and his Ph.D. degree from the University of California, Los Angeles. Dr. Martin came here from Blackfoot, Idaho, where he was chief clinical psychologist at the State Hospital. He has held various positions in this specialty in Iowa and at the Veterans Administration in Los Angeles.

On June 15, 1956 Dr. Boris Gertz joined the psychology staff. He was given assignments emphasizing work at the State Park Division, and problems referred by the Courts throughout the State. Dr. Gertz received his preliminary education in New York and Connecticut, and in 1955 secured his Ph.D. degree from the Florida State University, Gainesville, Florida; with his clinical internship at the Springfield State Hospital, Sykesville, Maryland. He served as a counselor with children, as well as instructor at the Elgin Air Force Base in Florida (1944-1946) and at the Florida State Hospital.

VOLUNTEER SERVICE PROGRAM

The volunteer service program initiated by the hospital superintendent on November 1, 1954 became increasingly valuable in bringing patients in contact with affairs and individuals outside the hospital, which created a feeling of happiness for them, and a vital educational link with the community.

On September 26, 1955 Mrs. Walter F. (Edith L.) Hudson of Columbia assumed the duties of the recently created position of director of volunteer services at the Columbia Division.

The program gained impetus with volunteers from churches in Greater Columbia and the Lexington County area participating. During the year 317 parties were held on the wards with an average of 244 church volunteers visiting their adopted assigned areas each month.

Patients from four wards were taken for bus rides about the city and surrounding country, after which refreshments were served. Every effort was made to have interesting get-togethers, recreational and tea parties with delicious refreshments, often homemade. Entertainments included musicals, skits, performances by magicians, contests, bingo and various other games. Aside from the personal visits which meant so much, birthdays were remembered with cards and gifts, and frequently with a decorated cake for the patient friends to enjoy.

The groups were generous with gifts of all kinds for the happiness and comfort of the patients, as well as to make the wards cheerfully homelike and more comfortable.

Among the numerous gifts were 6 TV sets, 5 Venetian blinds, 3 radio-phonographs and records, 9 plastic chairs, irons and ironing boards, 113 housecoats, 75 bathrobes for men, 100 dacron dresses, drapes for 5 day rooms, and many other items of various kinds. For the past several months a beautician from the city has generously assisted the hospital beauty salon operators of the Columbia Division several hours each month with the care and arrangement of the patients' hair.

During the holidays groups beautifully decorated the adopted areas and unusual parties were held, complete with Christmas refreshments and in several instances Santa Claus to distribute gifts.

Christmas carols were rendered throughout the Columbia Division campus and in some of the wards by carolers from churches and the Columbia and Baptist Hospital Schools of Nursing, as well as the Baptist Student Centre.

In areas of the hospital where visiting was not considered desirable, the volunteers participated in projects for the comfort and pleasure of the patients. Refreshments were supplied for parties and there were items to create more attractive surroundings. Often there were personal remembrances for individuals.

The thoughtfulness and generosity of volunteers and others throughout the State was outstanding and enabled each patient at the Columbia Division to receive gifts, with more than enough for every patient at the State Park Division.

Plans are being formulated for a definite volunteer service program with a director for the State Park Division.

ADMINISTRATIVE DEPARTMENT

PERSONNEL DIVISION

An improvement was noted in the employment trend during the year. A majority of the positions were filled as they became vacant. The problem of obtaining qualified stenographic personnel has become increasingly difficult. There is a reluctance on the part of such personnel to accept employment which does not offer a 5 day work week.

There were 525 employments, 388 separations and 16 transfers to Pineland. The annual rate of turnover based on an average of 1377 employees remained on the same level (29%) as the previous year.

In an election held May 20, 1955, members of the S. C. Retirement System voted in favor of a plan to coordinate the S. C. Retirement System and Federal Social Security. All State Hospital employees with the exception of gatemen were covered under the Social Security program effective July 1, 1955. A referendum was held on November 22, 1955, for employees who were members of the Police Insurance and Annuity Fund and as result of the election, gatemen at this institution were covered under Federal Social Security retroactive to October 1, 1955.

As a result of increased payroll requirements it became necessary to place the payroll operation on tabulating equipment. In order to facilitate this operation, the payroll section was transferred to the Tabulating Division, S. C. Mental Health Commission, effective with the pay period beginning September 23, 1955.

On January 1, 1956, the hospital began photographing and fingerprinting all new personnel. This procedure was established in order to provide a more positive means of identification. The identification records are filed in each employee's personnel folder.

An increase in the number of motor vehicles operating on hospital grounds has made identification of employee motor vehicles a necessity. A system was established for the registration of all employee motor vehicles and the issuance of identification decals for use on each vehicle. Registration of vehicles was completed and enforcement of the regulation requiring employees to display decals on their vehicles was started June 18, 1956.

The purpose of motor vehicle identification decals is to facilitate employees entering and leaving hospital grounds and also to entitle them to the privilege of parking in designated areas.

On February 17, 1956, 84 service emblems and certificates were awarded at ceremonies at the Columbia and State Park Divisions.

- 58 Five-year awards
- 16 Ten-year awards
- 5 Twenty-year awards
- 3 Thirty-year awards
- 2 Forty-year awards

PERSONNEL DIVISION—Continued

Chart I

PERSONNEL EMPLOYED, TRANSFERRED AND SEPARATED

Fiscal Year 1955-56

MONTH	Number Employed	Number Transferred To Pineland	Number Separated
July	137	....	44
August	41	....	49
September	47	1	34
October	31	....	26
November	30	1	35
December	32	1	23
January	29	....	25
February	36	12	25
March	39	....	39
April	30	1	26
May	25	....	24
June	48	....	38
Total.....	525	16	388

Chart II

REASONS FOR SEPARATION FROM SERVICE DURING FISCAL YEAR 1955-56

	Number of Separations	Per Cent (Nearest One-tenth)
<i>A. Resignation</i>		
1. Better opportunity.....	56	14.4
2. Disliked working conditions.....	9	2.3
3. Home responsibilities.....	27	7.0
4. Hours too long or inconvenient.....	1	.2
5. Ill health.....	18	4.6
6. Insufficient salary.....	1	.2
7. Job standards not met during trial period	4	1.0
8. Marriage	0	—
9. Military service.....	15	3.9
10. Moved from area of employment.....	35	9.0
11. Pregnancy	30	7.7
12. Returning to school.....	8	2.1
13. Transportation	3	.8
14. Other	42	10.8
<i>B. Discharge</i>		
1. Did not get along with fellow workers....	0	—
2. Did not get along with Supervisor.....	0	—
3. Dishonesty	7	1.8
4. Failure to report for work.....	64	16.5
5. Forced resignation.....	5	1.3
6. Insubordination	3	.8
7. Irregular attendance.....	4	1.0
8. Misconduct or violation of rules.....	22	5.7
9. Personality	0	—
10. References	0	—
11. Unsatisfactory work or incompetency....	4	1.0
12. Other	5	1.3
<i>C. Other</i>		
1. Death	4	1.0
2. Disability retirement.....	1	.2
3. Expiration of employment.....	17	4.4
4. Ill health	1	.2
5. Job abolished.....	0	—
6. Service retirement	1	.2
7. Other	1	.2
Total.....	388	99.6

REPORT OF PERSONNEL

June 30, 1956

FULL TIME PERSONNEL

DEPARTMENT	EMPLOYED						VACANCIES						Total
	White Men	White Women	Negro Men	Negro Women	Total	White Men	White Women	Negro Men	Negro Women	Total	Authorized Strength		
ADMINISTRATION DEPARTMENT:													
Administrative Division.....	3	3	..	..	6	..	..	..	..	..	6
Finance Division.....	3	6	..	..	9	..	..	..	..	..	9
Personnel Division.....	3	3	..	..	6	..	1	..	..	1	7
Registrar Division.....	3	30	..	1	34	..	..	..	..	..	34
Total.....	12	42	..	1	55	..	1	..	..	1	56
MEDICAL DEPARTMENT:													
Professional Services.....	2	1	..	..	3	..	..	..	..	..	3
White Male Service.....	184	12	..	..	196	4	1	..	..	5	201
White Female Service.....	5	211	..	..	216	1	4	..	..	5	221
Colored Male Service.....	8	..	146	11	165	..	..	4	..	4	169
Colored Female Service.....	2	6	..	176	184	..	..	..	2	..	186
Nursing Education Service.....	..	2	..	..	2	..	..	..	..	..	2
Medical Auxiliary Service.....	19	24	9	6	58	2	1	..	2	5	63		
Total.....	220	256	155	193	824	7	6	4	4	21	845		
GENERAL PLANT DEPARTMENT:													
Canteen Division.....	5	2	..	..	7	..	..	..	..	..	7
Dietary Division.....	27	17	85	82	211	1	..	..	1	2	213
Supply Division.....	9	..	5	..	14	..	..	..	..	..	14
Laundry Division.....	4	4	16	27	51	1	..	..	1	2	53
Milk Processing Division.....	3	..	5	..	8	..	..	..	..	..	8
Engineering Division.....	90	1	91	2	184	1	..	2	..	3	187		
Farm Division.....	4	1	13	..	18	..	..	..	1	1	19
Total.....	142	25	215	111	493	3	..	2	3	8	500		
TOTAL—Full Time Personnel....	374	323	370	305	1,372	10	7	6	7	30	1,402		

PART TIME PERSONNEL

DEPARTMENT	EMPLOYED						VACANCIES						Total
	White Men	White Women	Negro Men	Negro Women	Total	White Men	White Women	Negro Men	Negro Women	Total	Authorized Strength		
ADMINISTRATIVE DEPARTMENT:													
Finance Division.....	1	1	..	..	2	..	..	..	..	..	2
Total.....	1	1	..	..	2	..	..	..	..	..	2
MEDICAL DEPARTMENT:													
Medical Staff—Part Time.....	10	..	..	..	10	..	..	..	..	..	10
Medical Auxiliary Service.....	7	1	..	1	9	2	..	..	..	2	11
Total.....	17	1	..	1	19	2	..	..	..	2	21
TOTAL—Part Time Personnel..	18	2	..	1	21	2	..	..	..	2	23
GRAND TOTAL—All Hospital Personnel	392	325	370	306	1,393	12	7	6	7	32	1,425		

PERSONNEL DIVISION—Continued**RETIRED**

Fiscal Year 1955-56

MRS. MATTIE R. BROWN

Position: Intermediate Medical Stenographer
Department: Administrative, Registrar Division
Disability Retirement: July 14, 1955
Length of Service: 24 years, 9 months, 15 days

MR. CLARENCE F. ADAMS

Position: Hospital Attendant
Department: Medical, White Male Service
Service Retirement: July 19, 1955
Length of Service: 10 years, 9 months, 1 day

DEATHS

Fiscal Year 1955-56

Mr. WILLIE F. LAND

Position: Hospital Attendant
Department: Medical, Colored Male Service
Date of Death: October 26, 1955
Length of Service: 10 years, 6 months, 6 days

MR. WOODROW A. BRAZELL

Position: Hospital Attendant
Department: Medical, White Male Service
Date of Death: April 20, 1956
Length of Service: 5 years, 5 months, 2 days

MR. HOWARD H. DOBBINS

Position: Gateman
Department: General Plant, Engineering Division
Date of Death: May 16, 1956
Length of Service: 5 years, 7 months, 29 days

Mr. JAMES BRUNSON

Position: Hospital Attendant
Department: Medical, Colored Male Service
Date of Death: June 2, 1956
Length of Service: 11 months

ADMINISTRATIVE DEPARTMENT

FINANCE

Maintenance

The total operating revenue for the year was \$5,108,767.86, all of which was expended.

In addition to expenditures of \$5,108,767.86, the following supplies were furnished to the hospital, cost free:

U. S. Surplus foods.....	\$238,463.61
Fresh milk, 360,736.3 gallons.....	194,797.76

Based on a daily average population of 6113, the daily per capita cost was \$2.29. Excluding milk and surplus foods, the per diem amounted to \$2.25 (State appropriation).

During the year \$52,608.95 was remitted to the General Fund of the State of South Carolina, representing collections from employees for subsistence, etc. and sale of items purchased in prior years.

Permanent Improvements

All funds for permanent improvements were provided by State Appropriation except: Rents U. S. Public Health Service \$1,950.00.

The following projects were completed during 1955-56:

Auditorium—Columbia Division

Auditorium—State Park Division

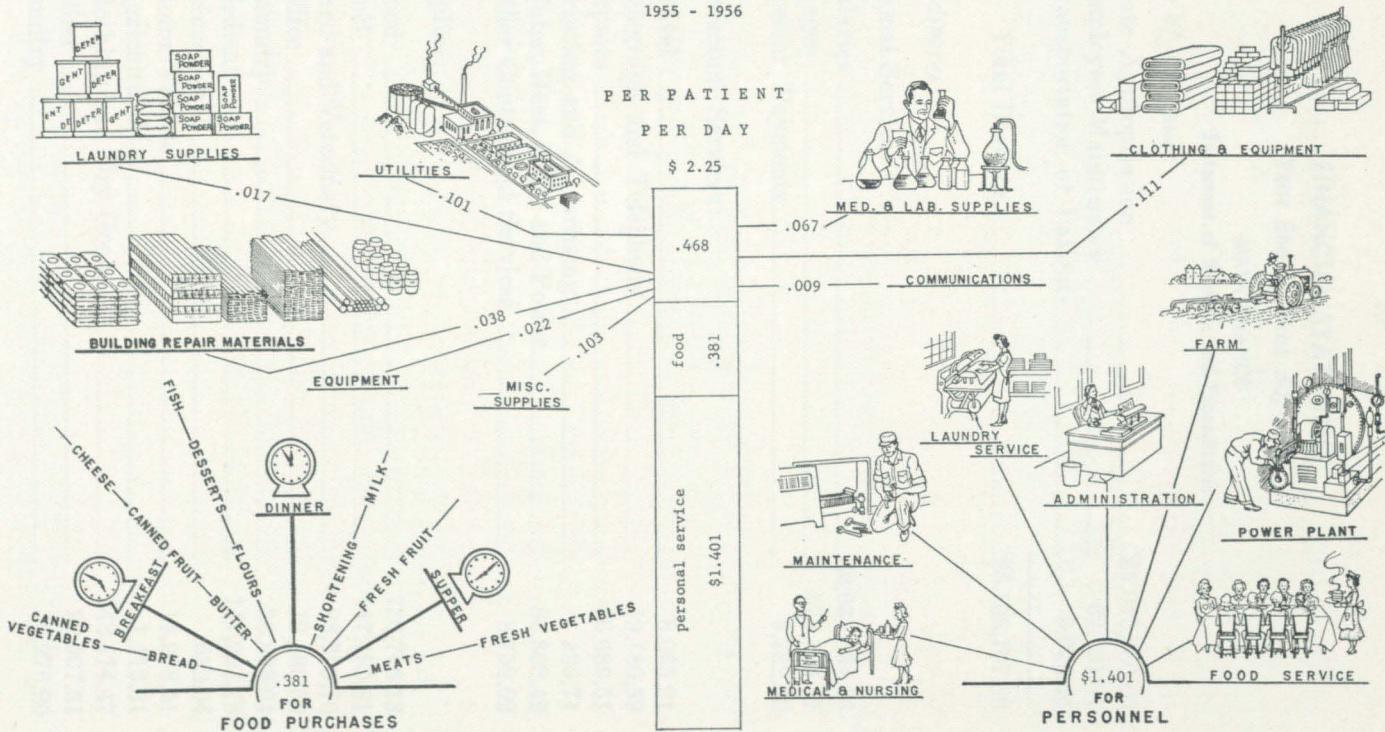
The project, Renovation of Existing Buildings, was in the process of completion as of June 30, 1956.

Funds are on hand, in the amount of \$2,181,134.58, for Construction of Ward Buildings, Columbia Division, and Renovation of Existing Buildings.

SOUTH CAROLINA STATE HOSPITAL

MAINTENANCE EXPENDITURE

1955 - 1956



Scale: $1/45'' = \$0.01$

FINANCIAL STATEMENT

Year Ending June 30, 1956

MAINTENANCE

Statement of Revenue and Expenditures

Source of Revenue:

State Appropriation	\$5,042,600.00
Employees Maintenance.....	62,191.81
Transportation of Patients.....	3,976.05
Total Revenue.....	\$5,108,767.86

Expenditures:

Personal Service:

Salaries	\$2,631,364.46
Wages	579,173.37
Special Payments.....	6,782.30

Contractual Services:

Travel	8,065.21
Telegraph and Telephone.....	19,180.59
Repairs	86,689.51
Printing and Advertising.....	139.71
Water, Heat, Light and Power.....	80,303.42
Other Contractual Services.....	8,752.02

Supplies:

Food	730,746.13
Fuel	147,199.81
Feed and Veterinary.....	88,710.76
Office	12,580.59
Laundry	38,899.94
Medical	147,227.78
Educational	652.64
Motor Vehicle	14,978.41
Agricultural	1,415.31
Clothing and Dry Goods.....	248,474.47
Other	92,507.61
Poultry	19,276.20

Fixed Charges and Contributions:

Rents	391.95
Insurance	60,944.44
Other	175.00

Equipment:

Office	12,945.70
Medical	4,181.16
Household	12,830.69
Motor Vehicle	7,646.02
Agricultural	
Livestock	395.00
Other	11,137.66
Payment on Sprinkler System Note	35,000.00

Total Expenditures.....\$5,108,767.86

PERMANENT IMPROVEMENTS

Statement of Receipts and Disbursements

Year Ended June 30, 1956

Receipts:

State Appropriations	\$ 270,250.31
Rents	1,950.00
Total	\$ 272,200.31

Disbursements:

Construction and Improvements, Etc.

Steam Plant Extension	\$ 375.98
Construction of Auditorium—Columbia	123,781.20
Construction of Auditorium—State Park	64,776.73
Renovate Existing Buildings	83,266.40
Total	\$ 272,200.31

GENERAL PLANT DEPARTMENT

Canteen Division

Under handicaps both units of the canteen continue to render creditable service to patients. Sales for the year totalled \$113,480.16. The building at Columbia is too small for adequate service and should be enlarged. Hastily constructed seven years ago as a temporary building, the unit at State Park should be replaced.

Dietary Division

The Food Service Center at Columbia, in its second year of operation, continued an improved service to patients. A new cafeteria in the renovated Thompson Building was equipped and put into operation. Mealpack equipment for approximately 100 special diets was acquired, thus insuring delivery of these diets to all points in good condition.

An Honor Award was given the Food Service Center in the Annual Food Service Contest sponsored by Institutions Magazine for outstanding achievement in handling, storage, preparation, and service of food in mass feeding.

The central kitchen and congregate dining rooms at State Park continue to be a matter of grave concern. Both building and equipment, inadequate in capacity, continue to deteriorate while the demands increase. Corrective measures cannot much longer be delayed without disastrous results.

Surplus foods valued at \$380,463.57 were received through Commodity Stabilization Service. Included were more than 133 tons of butter. The value of all items to the budget is estimated at about \$239,000.

Engineering Division

Complete renovation of the Thompson Building was accomplished. Included were quarry tile floors, additional rest room and shower facilities, replastering of walls, new electrical wiring and lighting, roof repairs, waterproofing of walls, new cafeteria with equipment, and painting.

The need for a major repair program continues. Once the physical plant is restored to a reasonably good state of repair

the maintenance problem will be somewhat reduced. Personnel assigned to maintenance has not increased in number with the work load.

Farm Division

Although the need existed, no increase in production was accomplished for pork or poultry. The required housing could not be provided in the absence of funds. A substantial increase in egg production resulted from a change of breed in laying hens, but houses are needed if demands are to be met. Only about 55,000 pine seedlings were available for planting, drought in the nursery necessitating a reduction from the usual number.

The following items were produced and made available for hospital use:

216,760	pounds	Dressed Poultry
203,296	pounds	Dressed Pork
26,885	pounds	Dressed Beef
2,783	Cases	Eggs
335	bushels	Sweet Potatoes
8,361		Cantaloupes
11,432		Watermelons

Laundry Division

Commercial laundry service, primarily in the latter half of the year, to the extent of \$5700. was necessary as a supplement to hospital operations. A fortunate procurement of surplus Army equipment, however, made it possible to discontinue the commercial service. The general situation, nevertheless, is still quite critical and requires serious and thorough consideration.

Milk Plant Division

South Carolina Penitentiary farms delivered 360,736 gallons of raw milk for hospital use and 36,600 gallons for its own use. All of this milk was clarified, pasteurized, and homogenized. With the use of dry milk solids and chocolate powder the total supply of milk issued was extended to 399,836 gallons.

Supply Division

In addition to receiving, storing, issuing, and maintaining inventory records on general supplies, the supply service was involved in manufacturing and/or processing the following items:

Mattresses	2,560	Meal	44,965 lbs.
Mattress Covers..	1,912	Meal (Feed).....	540,985 lbs.
Pillows	2,134	Butter	267,328 lbs.
Pillow Cases.....	16,776	Cheese	122,522 lbs.
Sheets	38,848	Shortening	63,298 lbs.
Dresses	22,301	Rice	107,800 lbs.
Cracked Corn	117,900 lbs.	Cured Hams.....	30,082 lbs.
Ground Oats.....	154,835 lbs.	Milk, dry.....	118,350 lbs.
Slips	23,217	Corn, bulk.....	160,000 lbs.
Aprons	1,992	Cottonseed Oil..	4,000 gal.
Night Shirts.....	9,096	Lard	911 cases
Table Cloths	155	Canned Pork.....	1,527 cases
Grits	142,255 lbs.	Beans	1,675 bags

ACKNOWLEDGMENTS

From the standpoint of accomplishments the year was a successful one, due in a large measure to the loyal support and co-operation of all personnel, and the untiring efforts for the economic operation of the hospital, for which grateful acknowledgment is made.

There is also appreciation to the personnel for sympathetic understanding and continuous endeavors to promote the welfare and comfort of patients intrusted to our care.

Again thanks are expressed for the confidence, advice and encouragement of the South Carolina Mental Health Commission with the many problems presented.

Working with the General Assembly and with various State Departments was a privilege and an inspiration.

The public, TV and radio stations and the press were most generous not only with material effects, but in the wide coverage of feature stories to awaken and stimulate more interest in the mental health program, and there is gratitude for this interest and helpfulness.

Yours very truly

WILLIAM S. HALL, M.D.
Superintendent.

REPORT OF ARCHITECTS

July 1, 1956

Dr. William S. Hall, Superintendent
South Carolina State Hospital
Columbia, S. C.

Dear Doctor Hall:

We submit herewith our report for the fiscal year ending June 30, 1956 covering construction program under the South Carolina Mental Health Commission of work at the South Carolina State Hospital, both Columbia and State Park Divisions.

The construction program has been carried on under the supervision of this office and in consultation with you, the staff and the Mental Health Commission, Mr. G. A. Buchanan, Jr. Chairman.

The Resident Engineer, Mr. C. H. Davis, was officially released in December 1955 and his work was completely taken over by our office. We report on individual projects, as follows:

Project No. 208—Auditorium Building and Library—Columbia Division—(Benet-Horger).

Work on this building was completed and accepted as being in accordance with the plans and specifications on October 21, 1955. The contractor's guarantee for one year started on this date. The building has been completely furnished and is now in use.

Project No. 209—Auditorium Building—State Park Division—(Fisher).

This building was completed and accepted on September 15, 1955. The contractor's guarantee for one year started on this date. This building has also been completely furnished and is in constant use.

Project No. 210—Intensive Treatment Ward Building. The Mental Health Commission has decided that the balance of funds available be used for the construction of the above project. Considerable thought has already been given the project starting as early as 1953. About this time the architects together with Mr. Buchanan, Dr. Hall and Dr. Beckman made inspection trips to mental institutions in the North and Northeast to study this

type of building. Considerable information was gathered. Preliminary sketches have been prepared and are being studied and revised constantly. Application has been made in a preliminary way to ascertain if funds are available under the Hill-Burton Act titled 725 and the Diagnostic and Treatment Act titled 482. It was found that some funds would probably be available and we were requested to assist in preparation of application in Part I requesting Federal assistance from the above mentioned sources. This application will be forwarded within the next few weeks.

Project No. 211—Office Building for South Carolina Mental Health Commission. Final sketches for this project were submitted to Mr. Buchanan, Chairman, on June 6, 1956. We were instructed to proceed with the plans and specifications. These plans should be completed and bids received for the construction of the work sometime in September.

Miscellaneous. In addition to the above your architects have been available for consulting service on miscellaneous construction, repairs, etc. The usual follow-through covering corrections of work have been accomplished. The work of rehabilitating the Thompson and the Talley Buildings is being carried on by the forces of the hospital under the supervision of the hospital engineer.

Respectfully submitted

LaFAYE, FAIR, LaFAYE & ASSOCIATES
R. S. LaFAYE

LABORATORY OF TROPICAL DISEASES

Annual Report 1955-1956

Dr. William S. Hall
Superintendent
South Carolina State Hospital
Columbia, South Carolina

Dear Dr. Hall:

The annual report of the Laboratory of Tropical Diseases, National Institutes of Health, Public Health Service, in connection with the South Carolina State Hospital for the year ending June 30, 1956, is respectfully submitted.

The patterns of research delineated last year have continued. These concern mainly parasitism as related to mental institutions, development of drugs to treat parasitic infections, malaria, relationships of parasites to virus transmission, and the significance of toxoplasmosis to mental conditions.

The laboratory continues to serve as the national center of strains of malaria useful for the treatment of neurosyphilis, nephrosis and other diseases.

SUMMARY OF RESEARCH

Treatment of Intestinal Parasites: One of the newer antibiotics, puromycin (Stylomycin^(R)), has been tried extensively. Given at the rate of one gram daily for four days, it has the remarkable ability of eliminating all of the protozoan parasites from the gut. This promises to be a good therapeutic drug against amebic dysentery.

In addition, it was shown that when the drug was given in small amounts three times weekly for a period of six weeks, it prevented the patients from getting any protozoan parasites. Therefore, it appears to be useful as a prophylactic drug.

Puromycin also has some effect against *Trichuris* (whipworm). As there is not now a good drug against this worm, further investigation with this drug seems warranted.

Hookworm infections also are difficult to eradicate. Piperazine citrate and toluene show some activity against these worms and are being observed further.

Summary of Research

New Parasite for South Carolina Found: The patients at Pineland were examined for intestinal parasites. The rate of infection was fairly high. Of special interest was the finding of four cases of *Isospora belli*, a single-cell parasite not previously reported from this state and considered to be rare throughout the country. The patients' histories indicated that this parasite was associated with a diarrhea.

Intestinal Parasites in Mental Patients: At regular intervals, all of the patients in Saunders building have been examined to determine the prevalence and fluctuations of parasitic infections. So far this population has been examined for 20 months. It has been found that in this area where little contamination of the soil in the exercise areas has occurred, there has been no increase in the worm infections. The hookworm and whipworm (*Trichuris*) infections present in the patients at a high rate, namely, 73 and 85 per cent when they were moved into the building tended to persist. There appeared to be a decrease in the other worm infections. With the protozoan parasites, some species appeared to remain fairly stable while others such as *Entamoeba histolytica*, *Iodamoeba*, and the flagellates appear to have a high rate of transmission. Only two of the 132 patients followed in this building went through the 20-month period without parasites.

This work provides basic information that is helpful in developing methods of control and prophylactic drugs to prevent the transmission of the parasites.

Malaria Studies: We are cooperating in a study by the Public Health Service being made at the request of the World Health Organization to determine if malaria can be controlled by putting an antimalarial drug in common table salt. Volunteer prisoners at a Federal prison are on a diet where the salt used in food preparation contains the malarial drugs. We infect the mosquitoes with malaria and they are allowed to bite the volunteers. The experiments are not yet complete.

Other malaria studies are determining whether resistance can be developed to one of the new drugs, pyrimethamine, when given in the usual doses.

Mosquito Genetics: Selective inbreeding of *Anopheles freeborni* through 16 generations reduced certain morphological variations.

Virus-Parasite Associations: The possibility of virus being transmitted by parasites was studied throughout the year. Attempts were made to transmit lymphochoriomeningitis by *Trichina* larvae.

The larvae of a mouse tapeworm did not transmit the same virus when these two pathogens were in association.

The papilloma virus was transmitted to rabbits by the penetration of the larvae of rat hookworm. However, when the fibroma virus was tried in a similar fashion, the penetration of the larvae did not result in the transmission of the disease.

Further work is being done on the possible transmission of viruses by parasites. Attention also is being directed toward the transmission by arthropods, such as mosquitoes, gnats, et cetera, of virus acquired during the developmental or adult stage.

Toxoplasmosis: The survey of mental patients to determine the number showing antibodies to toxoplasmosis continued during the year.

Whitten Village is the only group for which partial results are available. The sera positive for toxoplasmosis amounted to 28.6 per cent. The groups (mainly by building) ranged from 14 to 36 per cent positive except for one building which was 52 per cent positive, this being significantly higher than the rest.

Parasite Cytology: The project on the chromosome patterns in various species has been completed and the results are being published. The chief conclusions were that the genus *plasmodium* consists of two species complexes and that *P. berghei* (from rats is probably related to the bird malarias. A study is underway on the effects of the drug puromycin on the nucleus and cytoplasm of *Trypanosoma gambiense* (African sleeping sickness). Two kinds of cellular inclusions are produced following drug treatment. It is hoped that the identification of these inclusions cytochemically may provide a lead as to the action of the drug.

Studies during the past year on mosquito chromosomes have been on the giant salivary gland chromosomes and on ordinary

somatic chromosomes from other tissues. These latter have brought to light an extremely close pairing. There are some data to indicate that this may be an actual gene for gene synapsis. If this can be established, it would have considerable genetic significance. Maps of the salivary gland chromosomes have been worked out for *Anopheles quadrimaculatus* but are complete only for the sex chromosome. The sex chromosome of *A. quadrimaculatus* is strikingly different from that of *A. freeborni* and the species can be distinguished by this one feature alone. Each of these species was formerly important in the transmission of malaria.

Insectary Production: A total of 309,214 mosquitoes were reared for routine and experimental purposes during the year.

Malaria Inocula Shipped: During the year 54 malaria inocula were shipped: 39 for neurosyphilis, 12 for nephrosis, and 3 for other purposes.

Visitors

Foreign visitors during the year included:

Dr. Luang Ayurakitkosol, Deputy-General of Health, Ministry of Public Health, Bangkok, Thailand.

Dr. Noe de Jesus Cabrera-Palma, In charge of Evaluation Department, Malaria Eradication Program of Mexico.

Mr. Humberto Romero, Sanitary Engineer, Malaria control, Mexico City.

Dr. Sunthorn Srihongse, Medical Officer in Charge of the Malaria Control Operations in Northern Thailand.

Several visitors on foreign assignments have visited the laboratory, including:

Dr. George J. Burton, Malaria Control Advisor to the U.S.A. Operations Mission in Nepal.

Sr. Asst. Sanitarian Edgar A. Smith, Entomologist and Malaria Control Advisor to U.S.A. Operations Mission in Tandjung Karang, Indonesia.

Asst. Sanitarian Thomas S. Loeber, Medical Entomologist, assigned to USA, Operations Mission in Tandjung Karang, Indonesia.

Dr. Raymond L. Laird, leader of the International Cooperation Administration Malaria Control Project in Indonesia, returning to Indonesia for a second two-year assignment.

Mr. Jalil S. Karam, Sanitarian of the Malaria Control Team, assigned to the U. S. Operations Mission, Monrovia, Liberia.

Dr. John W. McDowell, Scientist, Public Health Service, just completing a two-year assignment as Malaria Control Advisor to the Iranian Government, and on his way to an assignment as Malaria Advisor to the Ministry of Health in the Philippines.

Miscellaneous

Dr. Robert C. Rendtorff, Public Health Service Surgeon stationed at this laboratory for about two years, resigned as of September 25, 1955, to accept a teaching position in the Division of Preventive Medicine, University of Tennessee College of Medicine in Memphis, Tennessee.

Dr. Martin D. Young accepted a five-year appointment to continue as a member of the World Health Organization's Expert Advisory Panel on Malaria. This appointment was effective on July 1, 1956. He has been a member of this panel since 1951.

Dr. Geoffrey M. Jeffery and Dr. Robert W. Burgess were selected by the South Carolina Academy of Science to receive the Jefferson Award for 1956 for their paper on "Infection of mosquito larvae with the virus of Lymphocytic choriomeningitis."

Meetings

Staff members attending the annual meeting of the American Society of Tropical Medicine and Hygiene in Boston, November 2-5, 1955, were:

Dr. Martin D. Young, to attend as a Council member and Past President, and to present two papers entitled: "The effect of Pyrimethamine (Daraprim) upon induced vivax and malariae infections," and "Trials of puromycin against infections of intestinal parasites.";

Dr. Robert W. Burgess, as a member and to present a paper entitled "Variations and inheritance of certain larval characters of members of American *Anopheles*";

Dr. Geoffrey M. Jeffery, as a member and to present a paper entitled "Relapses with Chesson strain *Plasmodium vivax* following treatment with chloroquine";

Miss Aimee Wilcox, as a member.

Dr. Martin D. Young and Dr. Gordon B. Wolcott attended the annual meetings of the American Association for the Advancement of Science in Atlanta, Georgia, December 27-31, 1955. Dr. Young attended the Council meeting as a member

of the Council, and the Sigma Xi meeting as President of the Sigma Xi Club of the University of South Carolina. He presented a paper entitled "The effectiveness of piperazine citrate against intestinal parasites, especially *Ascaris*, in mental patients," by Martin D. Young and Joe E. Freed, to the meeting of the American Society of Parasitologists. Dr. Wolcott attended the interim meeting of the Council of the Association of Southeastern Biologists.

Attending the annual meeting of the South Carolina Academy of Science in Clemson on April 13-14, 1956, were:

Dr. Martin D. Young, attending the Council meeting and as AAAS representative reporting on the December meeting in Atlanta;

Dr. Geoffrey M. Jeffery, presenting a paper entitled "*Isospora belli*: a human parasite newly reported in South Carolina";

Dr. Robert W. Burgess, presenting a paper entitled "Infection of mosquito larvae with the virus of lymphocytic choriomeningitis";

Dr. Gordon B. Wolcott, presenting a paper entitled "Salivary gland chromosomes in *Anopheles quadrimaculatus*."

Drs. Gordon B. Wolcott and Geoffrey M. Jeffery attended the annual meeting of the Association of Southeastern Biologists at Duke University April 19-21, 1956. Dr. Wolcott presented a paper entitled "The chromosomes and somatic pairing in *Anopheles quadrimaculatus*," and Dr. Jeffery presented a paper entitled "*Isospora belli*: a human parasite newly reported in South Carolina." Dr. Wolcott also attended the Executive Committee Meeting.

Papers Published

Burgess, R. W. Experiments in Hybridizing *Anopheles freeborni* Aitken and *Anopheles punctipennis* (Say). Ann. Ent. Soc. Am. 48:229-231. 1955.

Rendtorff, R. C. Toxoplasmosis. The Recorder of the Columbia Medical Society. XIX:12-21. 1955

Arnold, J., Alving, A. S., Hockwald, R. S. Clayman, C. B., Dern, R. J., Beutler, E., Flanagan, C. L. and Jeffery, G.M. The Antimalarial Action of Primaquine Against Blood and Tissue Stages of *Falciparum* Malaria (Panama, P-F-6 Strain). J. Lab. and Clin. Med. 46:391-397, 1955.

Jeffery, G. M. and Eyles, D. E. Infectivity to Mosquitoes of *Plasmodium falciparum* as Related to Gametocyte Density and

Duration of Infection. Am. J. Trop. Med. and Hyg. 4:781-789. 1955.

Jeffery, G. M. and Rendtorff, R. C. Preservation of Viable Human Malaria Sporozoites by Low-Temperature Freezing. Exp. Parasit IV:445-454. 1955.

Young, M. D. Parasitism in Southeastern United States. Introduction. Pub. Health Rep. 70:957. 1955.

Jeffery, G. M. Relapses with Chesson Strain *Plasmodium vivax* Following Treatment with Chloroquine. Am. J. Trop. Med. Hyg. 5:1-13. 1955.

Burgess, R. W. The Effect of Topically Applied DDT on Development of *Plasmodium vivax* and *P. falciparum* in *Anopheles quadrimaculatus*. Am. J. Trop. Med. Hyg. 5:163-167. 1956.

Young, M. D. and Freed, J. E. The effect of Puromycin Against *Entamoeba histolytica* and Other Intestinal parasites. Sou. Med. J. 49:537-538. 1956.

Jeffery, G. M. Blood Meal Volume in *Anopheles quadrimaculatus*, *A. albimanus* and *Aedes aegypti*. Exp. Parasit. V:371-375. 1956.

Jeffery, G. M., Young, M. D. and Eyles, D. E. The Treatment of *Plasmodium falciparum* Infection with Chloroquine, with a Note on Infectivity to Mosquitoes of Primaquine- and Pyrimethamine-treated Cases. Am. J. Hyg. 64:1-11. 1956.

Rendtorff, R. C. Treatment of a Case of *Taenia saginata* Infection with Diphenhydramine. J. Parasit. 42:382. 1956.

Personnel

In addition to the Director, the personnel of the Laboratory of Tropical Diseases, as of June 30, 1956, included:

Dr. Robert W. Burgess, Entomologist; Dr. Geoffrey M. Jeffery, Senior Scientist; Dr. Gordon B. Wolcott, Biologist (Cytology); Miss Aimee Wilcox, Protozoologist; Mr. Jimmie C. Skinner, Medical Technician (Parasitology); Mr. Andrew J. Harrison, Research Technician (Parasitology); Miss Jeanie M. Holmes, Medical Biology Technician; Mr. Allen C. Brockman, Medical Biology Technician; Mrs. Juliana D. Sutton, Medical Biology Technician; Mr. Thomas S. Kearse, Medical Biology Technician; Mr. Leo E. Chester, Medical Biology Technician; Mrs. Mary N. Schwinn, Secretary; Miss Ada P. Hall, Purchasing Agent; Miss Betty Anne Moore, Clerk-Stenographer; Mr. John Sharper, Jr., Laboratory Animal Caretaker.

Respectfully submitted

MARTIN D. YOUNG, *Sc.D.*
Scientist Director.

ADMINISTRATIVE DEPARTMENT

REGISTRAR DIVISION

STATISTICAL DATA

TABLE 2—FIRST ADMISSION DURING THE YEAR BY AGE AT ADMISSION AND MENTAL DISORDER—
WHITE MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	19	..	..	1	12	2	2	1	..	..	..
Drug or poison intoxication (except alcohol)....	6	..	..	..	1	2	3	..	..	..	..
All other conditions.....	1	..	..	..	..	..	1	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	26	..	..	1	13	5	6	1	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	5	..	1	1	1	..	..	2	..	..	..
Other CNS syphilis.....	1	..	..	..	1	..	..	..	..	..	..
Intracranial infections.....	1	1	..	..	..	..	..	..	..	..	..
Alcohol intoxication.....	3	..	..	..	..	1	2	..	..	..	..
Drug or poison intoxication (except alcohol)....	1	..	..	..	1	..	..	..	..	..	..
Birth trauma.....	1	..	..	..	1	..	..	..	..	..	..
Other trauma.....	4	..	..	1	1	..	1	..	..	..	..
Cerebral arteriosclerosis.....	174	..	..	..	1	14	30	71	51	6	1
Other circulatory disturbance.....	13	..	..	..	4	1	2	3	2	1	..
Convulsive disorder.....	6	..	2	2	1	1	..	..	..	..	..
Senile brain disease.....	8	..	..	..	..	..	..	2	4	2	..
Intracranial neoplasm.....	3	..	..	..	1	1	1	..	..	..	..
Diseases of unknown and uncertain cause.....	4	..	..	1	1	1	1	..	..	..	..
Chronic brain syndrome of unknown cause.....	2	..	..	..	1	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	226	1	4	5	14	20	37	78	57	9	1
PSYCHOTIC DISORDERS:											
Involuntional psychotic reaction.....	6	..	..	..	..	1	4	..	1	..	..
Manic-depressive reaction.....	18	..	..	1	2	4	8	..	3	..	..
Psychotic depressive reaction.....	5	..	..	..	..	4	1	..	..	..	..
Schizophrenic reactions.....	151	..	31	43	37	27	10	..	..	..	3
Paranoid reactions.....	1	..	..	..	..	..	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	181	..	31	44	39	36	24	..	4	..	3
PSYCHONEUROTIC REACTIONS.....	22	..	3	8	4	4	3	..	..	..	..
PERSONALITY DISORDERS:											
Personality pattern disturbance.....	2	..	1	1	..	..	..	..	..	..	..
Personality trait disturbance.....	17	2	4	9	1	1	..	..	..	..	..
Antisocial reaction.....	12	..	3	6	2	1	..	..	..	..	..
Dyssocial reaction.....	1	..	..	..	..	..	..	..	..	..	..
Sexual deviation.....	3	..	1	1	..	1	..	..	..	..	..
Alcoholism (addiction).....	102	..	1	22	46	27	4	..	1	..	1
Drug addiction.....	2	..	..	1	..	1	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	139	2	11	40	49	31	4	..	1	..	1
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE.....	3	..	..	..	1	1	1	..	..	..	..
MENTAL DEFICIENCY.....	16	..	4	9	2	1	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	54	2	14	14	11	7	1	1	..	..	4
GRAND TOTAL.....	667	5	67	121	133	105	76	80	62	9	9

TABLE 2—FIRST ADMISSION DURING THE YEAR BY AGE AT ADMISSION AND MENTAL DISORDER—
WHITE FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:										
Alcohol intoxication.....	8	..	..	2	4	2	..	..	..	..
Drug or poison intoxication (except alcohol)....	6	..	..	1	2	2	1	..	..	..
All other conditions.....	1	..	..	1	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	15	..	..	4	6	4	1	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Meningoencephalitic syphilis.....	1	..	..	..	..	..	1	..	..	..
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	..
Birth trauma.....	2	..	..	1	1	..	..	..	..	..
Other trauma.....	1	..	1	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	113	..	..	..	..	2	26	62	19	4
Other circulatory disturbance.....	14	..	..	..	1	5	5	2	1	..
Convulsive disorder.....	8	..	5	2	1	..	..	..	..	..
Senile brain disease.....	36	..	..	..	..	..	..	3	20	13
Other disturbance of metabolism, growth, and nutrition.....	2	..	..	..	1	1	..	..	..	..
Diseases of unknown and uncertain cause.....	2	..	..	..	1	1	..	..	..	..
Chronic brain syndrome of unknown cause.....	2	..	..	..	..	1	1	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	182	..	6	3	6	10	33	67	40	17
PSYCHOTIC DISORDERS:										
Involuntary psychotic reaction.....	12	..	..	..	3	7	2	..	..	..
Manic-depressive reaction.....	8	..	..	1	2	5	..	..	..	..
Schizophrenic reactions.....	169	..	17	64	48	25	12	1	..	2
Paranoid reactions.....	3	..	..	..	..	3	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	192	..	17	65	53	40	14	1	..	2
PSYCHONEUROTIC REACTIONS.....	75	..	2	21	19	22	8	2	..	1
PERSONALITY DISORDERS:										
Personality pattern disturbance.....	5	..	3	1	1	..	..	..	..	..
Personality trait disturbance.....	14	..	2	4	6	1	..	..	..	1
Antisocial reaction.....	1	..	1	..	..	..	..	..	..	..
Alcoholism (addiction).....	8	..	..	4	3	1	..	..	..	..
Drug addiction.....	1	..	..	..	..	1	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	29	..	6	9	10	3	..	..	..	1
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE.....	2	..	1	..	1	..	..	..	..	..
MENTAL DEFICIENCY.....	18	..	6	3	4	2	3	..	..	..
WITHOUT MENTAL DISORDER.....	13	3	3	3	3	..	..	..	..	1
GRAND TOTAL.....	526	3	41	108	102	81	59	70	40	5

TABLE 2—FIRST ADMISSION DURING THE YEAR BY AGE AT ADMISSION AND MENTAL DISORDER—
COLORED MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- Known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	26	..	2	13	9	2	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	2	..	..	2	..	..	..	..	..	..	..
All other conditions.....	10	..	2	2	1	4	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	38	..	5	17	10	6	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	21	..	1	2	7	4	3	1	3	..	..
Alcohol intoxication.....	25	..	3	5	13	3	..	1	..	..	..
Birth trauma.....	1	..	..	..	1	..	..	..	..	..	..
Other trauma.....	2	..	..	..	1	..	..	..	..	..	..
Cerebral arteriosclerosis.....	98	..	..	1	6	23	21	30	16	2	..
Other circulatory disturbance.....	2	..	..	1	..	1	..	..	..	..	..
Convulsive disorder.....	10	..	5	4	1	..	..	..	..	..	..
Senile brain disease.....	1	..	..	..	..	..	..	..	..	1	..
Diseases of unknown and uncertain cause.....	1	..	..	..	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	161	..	9	13	29	32	24	32	19	3	..
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	7	..	..	4	..	2	1	..	..	..	..
Psychotic depressive reaction.....	2	..	2	..	..	..	..	..	..	..	..
Schizophrenic reactions.....	98	1	27	41	18	9	1	..	..	..	1
TOTAL PSYCHOTIC DISORDERS.....	107	1	29	45	18	11	2	..	..	..	1
PERSONALITY DISORDERS:											
Antisocial reaction.....	1	..	..	1	..	..	..	..	..	..	..
Alcoholism (addiction).....	4	..	..	4	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	5	..	..	5	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	15	4	7	4	..	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	28	3	9	3	10	2	..	1	..	..	..
GRAND TOTAL.....	354	8	59	87	67	51	26	33	19	3	1

TABLE 2—FIRST ADMISSION DURING THE YEAR BY AGE AT ADMISSION AND MENTAL DISORDER—
COLORED FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	7	..	..	..	7	..	..	..	..	..	..
Convulsive disorder.....	1	..	1	..	..	..	..	..	..	..	..
All other conditions.....	1	..	..	..	..	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	9	..	1	..	7	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	1	..	..	..	..	1	..	..	..	..	..
Alcohol intoxication.....	1	..	..	1	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	44	..	..	..	1	16	10	12	5	..	..
Other circulatory disturbance.....	2	..	..	..	..	..	2	..	..	..	..
Convulsive disorder.....	11	..	5	3	..	3	..	..	..	..	..
Senile brain disease.....	28	..	..	..	..	..	2	11	10	5	..
Other disturbance of metabolism, growth, and nutrition	2	..	..	..	1	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	89	..	5	4	2	21	14	23	15	5	..
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	34	..	4	8	16	6	..	..	..	..	..
Schizophrenic reactions.....	72	1	17	34	13	7	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	106	1	21	42	29	13	..	..	..	..	..
PSYCHONEUROTIC REACTIONS.....	5	..	..	1	1	2	1	..	..	..	..
PERSONALITY DISORDERS:											
Personality pattern disturbance.....	1	1	..	..	..	..	..	..	..	..	..
Personality trait disturbance.....	2	1	1	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	3	2	1	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	8	..	..	4	2	2	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	15	4	7	1	1	1	1	..	..	..	..
GRAND TOTAL.....	235	7	35	52	42	40	16	23	15	5	..

TABLE 2—READMISSIONS DURING THE YEAR BY AGE AT ADMISSION AND MENTAL DISORDER—
WHITE MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	2	..	..	..	1	1	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	2	..	..	..	1	..	1	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	4	..	..	..	2	1	1	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Diseases and conditions due to prenatal (constitutional) influence.....	1	..	..	1	..	..	..	..	..	..	..
Meningoencephalitic syphilis.....	1	..	..	..	..	1	..	..	..	..	..
Epidemic encephalitis.....	2	..	..	..	1	1	..	..	..	..	..
Alcohol intoxication.....	1	..	..	..	..	1	..	..	..	..	..
Cerebral arteriosclerosis.....	23	..	..	..	1	1	7	8	6	..	..
Other circulatory disturbance.....	2	..	..	..	..	1	1	1	..	..	..
Convulsive disorder.....	4	..	1	1	..	1	1	..	..	..	..
Senile brain disease.....	1	..	..	..	..	..	..	..	..	1	..
TOTAL CHRONIC BRAIN SYNDROMES.....	35	..	1	2	2	3	11	9	6	1	..
PSYCHOTIC DISORDERS:											
Involuntional psychotic reaction.....	2	..	..	..	..	..	2	..	..	..	..
Manic-depressive reaction.....	22	..	..	..	..	4	8	7	2	..	1
Schizophrenic reactions.....	76	..	7	24	22	15	5	..	1	..	2
Paranoid reactions.....	1	..	..	..	..	..	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	101	..	7	24	22	19	16	7	3	..	3
PSYCHONEUROTIC REACTIONS.....	6	..	..	..	4	1	..	..	..	..	1
PERSONALITY DISORDERS:											
Personality pattern disturbance.....	1	..	..	..	1	..	..	..	..	..	..
Personality trait disturbance.....	1	..	..	..	..	1	..	..	..	..	..
Antisocial reaction.....	4	..	..	2	2	..	..	..	..	..	..
Alcoholism (addiction).....	40	..	..	6	13	14	4	2	..	..	1
Drug addiction.....	2	..	..	..	2	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	48	..	..	8	18	15	4	2	..	..	1
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE.....	1	..	..	..	1	..	..	..	..	..	..
MENTAL DEFICIENCY.....	5	..	1	..	1	3	..	..	..	..	..
MENTAL DISORDER, UNDIAGNOSED.....	1	..	1	..	..	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	12	..	2	2	1	4	1	..	..	..	2
GRAND TOTAL.....	213	..	12	36	51	46	33	18	9	1	7

TABLE 2—READMISSIONS DURING THE YEAR BY AGE AT ADMISSION AND MENTAL DISORDER—
WHITE FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	1	..	..	..	..	1	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	3	..	..	..	3	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	4	..	..	..	3	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	1	..	..	..	..	1	..	..	..	..	..
Alcohol intoxication.....	1	..	..	..	..	1	..	..	..	..	..
Birth trauma.....	1	1	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	24	..	..	..	..	1	3	12	6	1	1
Other circulatory disturbance.....	3	..	..	..	..	2	1	..	..	..	..
Convulsive disorder.....	3	..	..	3	1	1	..	..	..	..	..
Senile brain disease.....	2	..	..	..	..	..	1	..	1	..	..
Diseases of unknown and uncertain cause.....	4	..	..	..	1	3	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	41	1	..	3	2	9	4	13	6	2	1
PSYCHOTIC DISORDERS:											
Involuntary psychotic reaction.....	1	..	..	..	..	..	1	..	..	..	..
Manic-depressive reaction.....	12	..	..	..	..	6	5	1	..	..	..
Schizophrenic reactions.....	90	..	5	18	32	29	4	1	..	..	1
TOTAL PSYCHOTIC DISORDERS.....	103	..	5	18	32	35	10	2	..	..	1
PSYCHONEUROTIC REACTIONS.....	26	..	..	4	8	9	4	..	..	..	1
PERSONALITY DISORDERS:											
Personality pattern disturbance.....	5	..	..	2	2	1	..	..	..	..	..
Personality trait disturbance.....	4	..	1	2	1	..	..	..	..	..	..
Antisocial reaction.....	2	..	1	1	..	..	..	..	..	..	..
Alcoholism (addiction).....	6	..	..	..	4	1	1	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	17	..	2	5	7	2	1	..	..	..	..
MENTAL DEFICIENCY.....	5	..	..	2	2	1	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	1	..	..	..	1	..	..	..	..	..	..
GRAND TOTAL.....	197	1	7	32	55	57	19	15	6	2	3

TABLE 2—READMISSIONS DURING THE YEAR BY AGE AT ADMISSION AND MENTAL DISORDER—
COLORED MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	3	..	1	..	1	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	3	..	1	..	1	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	1	..	..	..	..	1	..	1	..	..	..
Alcohol intoxication.....	5	..	..	..	4	1	..	..	..	..	..
Birth trauma.....	1	..	1	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	12	..	..	..	..	1	3	5	3	..	..
Other circulatory disturbance.....	1	..	..	..	..	..	..	1	..	..	..
Convulsive disorder.....	6	..	1	3	2	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	26	..	2	3	6	2	3	7	3	..	..
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	6	..	..	1	2	..	3	..	..	..	..
Schizophrenic reactions.....	21	..	3	10	5	3	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	27	..	3	11	7	3	3	..	..	..	..
PERSONALITY DISORDERS:											
Alcoholism (addiction).....	1	..	..	..	1	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	..	..	..	1	..	..	..	..	..	..
MENTAL DEFICIENCY.....	2	..	1	..	..	1	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	3	..	..	1	1	..	1	..	..	..	..
GRAND TOTAL.....	62	..	7	15	16	7	7	7	3	..	..

TABLE 2—READMISSIONS DURING THE YEAR BY AGE AT ADMISSION AND MENTAL DISORDER—
COLORED FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH: Drug or poison intoxication (except alcohol).....	1	..	..	..	1	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	1	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	..	..
Birth trauma.....	1	..	..	..	1	..	..	..	..	..	..
Cerebral arteriosclerosis.....	9	..	..	..	..	3	5	1	..	..	..
Other circulatory disturbance.....	1	..	..	..	..	..	..	1	..	..	..
Convulsive disorder.....	1	..	..	..	1	..	..	..	..	..	..
Senile brain disease.....	2	..	..	..	..	..	..	2	..	..	..
Diseases of unknown and uncertain cause.....	1	..	..	..	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	16	..	..	..	3	4	5	4	..	..	..
PSYCHOTIC DISORDERS:											
Involuntary psychotic reaction.....	1	..	..	..	..	1	..	..	..	..	..
Manic-depressive reaction.....	27	..	..	10	8	4	4	..	..	1	..
Schizophrenic reactions.....	38	..	3	21	10	4	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	66	..	3	31	18	9	4	..	..	1	..
MENTAL DEFICIENCY.....	5	..	1	2	2	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	1	..	..	..	1	..	..	..	..	..	..
GRAND TOTAL.....	89	..	4	33	25	13	9	4	..	1	..

TABLE 3—ALL DISCHARGES—FIRST ADMISSIONS BY AGE AT DISCHARGE AND MENTAL DISORDERS—WHITE MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	19	..	..	1	11	4	2	1	..	..	..
Drug or poison intoxication (except alcohol).....	8	..	..	..	2	3	3	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	27	..	..	1	13	7	5	1	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	2	..	..	1	1	..	..	..	..	..	..
Other CNS syphilis.....	1	..	..	..	1	..	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	3	..	..	..	2	1	..	..	..	..	..
Birth trauma.....	2	..	..	1	..	..	1	..	..	..	..
Other trauma.....	1	..	1	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	47	..	..	..	1	5	11	25	5	..	..
Other circulatory disturbance.....	2	..	..	..	..	..	..	1	..	..	..
Convulsive disorder.....	12	2	3	3	3	1	..	..	..	..	..
Senile brain disease.....	3	..	..	..	..	1	..	..	..	..	..
Intracranial neoplasm.....	1	..	..	..	..	..	..	1	1	1	..
Diseases of unknown and uncertain cause.....	2	..	..	2	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES....	76	2	4	7	8	9	12	27	6	1	..
PSYCHOTIC DISORDERS:											
Involuntary psychotic reaction.....	5	..	..	..	..	2	3	..	..	..	..
Manic-depressive reaction.....	18	..	..	4	3	6	5	..	..	..	..
Schizophrenic reactions.....	84	..	13	39	28	3	1	..	..	..	..
Paranoid reactions.....	4	..	..	..	..	..	3	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	111	..	13	43	31	11	12	1	..	..	..
PSYCHOPHYSIOLOGIC AUTONOMIC AND VISCERAL DISORDERS.....	1	..	..	..	1	..	..	..	..	..	..
PSYCHONEUROTIC REACTION.....	26	..	6	6	6	6	2	..	..	..	..
PERSONALITY DISORDERS:											
Personality pattern disturbance.....	2	..	1	1	..	..	..	..	..	..	..
Personality trait disturbance.....	12	2	3	6	1	..	..	..	..	..	..
Antisocial reaction.....	12	..	3	6	3	..	..	..	..	..	..
Dyssocial reaction.....	1	..	1	..	..	..	..	..	..	..	..
Sexual deviation.....	1	..	1	..	..	..	..	..	..	..	..
Alcoholism (addiction).....	105	..	1	24	51	24	3	1	1	..	..
Drug addiction.....	2	..	..	1	..	1	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	135	2	10	38	55	25	3	1	1	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE	3	..	..	..	1	1	1	..	..	..	..
MENTAL DEFICIENCY.....	8	..	3	2	2	1	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	50	2	14	16	5	10	2	1	..	..	..
GRAND TOTAL.....	437	6	50	113	122	70	37	31	7	1	..

TABLE 3—ALL DISCHARGES—FIRST ADMISSIONS BY AGE AT DISCHARGE AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:										
Alcohol intoxication.....	3	..	..	2	..	1	..	..	..	..
Drug or poison intoxication (except alcohol)....	11	..	..	3	4	4	1	..	..	..
All other conditions.....	2	..	..	3	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	16	..	..	6	4	5	1	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Epidemic encephalitis.....	1	..	..	1	..	..	..	..	..	..
Alcohol intoxication.....	1	..	..	..	..	1	..	..	..	..
Birth trauma.....	1	..	..	..	1	..	..	..	..	..
Cerebral arteriosclerosis.....	40	..	..	..	..	3	11	22	4	..
Other circulatory disturbance.....	4	..	..	..	1	3	..	..	..	..
Convulsive disorder.....	9	2	2	2	2	1	..	..	..	..
Senile brain disease.....	3	..	..	..	..	..	..	2	1	..
TOTAL CHRONIC BRAIN SYNDROMES....	59	2	2	3	4	8	11	24	5	..
PSYCHOTIC DISORDERS:										
Involuntary psychotic reaction.....	10	..	..	..	3	5	2	..	..	..
Manic-depressive reaction.....	9	..	..	2	3	3	1	..	..	..
Schizophrenic reactions.....	153	..	37	53	45	11	5	1	..	1
Paranoid reactions.....	2	..	..	..	1	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	174	..	37	55	52	20	8	1	..	1
PSYCHONEUROTIC REACTION.....	66	..	8	18	19	16	5	..	..	..
PERSONALITY DISORDERS:										
Personality pattern disturbance.....	5	1	2	1	1	..	..	..	..	..
Personality trait disturbance.....	13	..	1	4	6	1	..	..	..	1
Antisocial reaction.....	1	..	1	..	..	..	..	..	..	..
Dyssocial reaction.....	1	..	..	..	..	..	..	..	..	1
Alcoholism (addiction).....	9	..	..	1	6	1	1	..	..	..
TOTAL PERSONALITY DISORDERS.....	29	1	4	6	13	2	1	..	..	2
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE	2	..	1	..	1	..	..	..	..	..
MENTAL DEFICIENCY.....	7	..	4	..	2	1	..	..	..	..
WITHOUT MENTAL DISORDER.....	9	3	2	1	3	..	..	..	..	..
GRAND TOTAL.....	362	6	58	89	98	52	26	25	5	1

TABLE 3—ALL DISCHARGES—FIRST ADMISSIONS BY AGE AT DISCHARGE AND MENTAL DISORDER—COLORED MALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)									Age Un- known
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	27	..	3	13	9	2	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	1	..	..	1	..	..	..	..	..	..	..
All other conditions.....	2	..	..	1	..	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	30	..	3	15	9	3	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	9	..	..	1	3	3	1	1	..	..	..
Alcohol intoxication.....	27	..	2	3	20	2	..	..	..	..	..
Birth trauma.....	2	..	1	..	1	..	..	..	..	..	..
Cerebral arteriosclerosis.....	26	..	..	..	2	11	8	5	..	..	..
Other circulatory disturbance.....	1	..	..	..	1	..	..	..	..	..	..
Convulsive disorder.....	8	..	4	4	..	..	..	..	..	..	..
Senile brain disease.....	1	..	..	..	..	..	..	..	1	..	..
Chronic brain syndromes of unknown cause.....	1	..	..	1	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES....	75	..	7	9	27	16	9	6	1	..	..
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	3	..	..	2	1	..	..	..	..	..	..
Schizophrenic reactions.....	82	1	27	39	13	1	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	85	1	27	41	14	1	1	..	..	..	..
PERSONALITY DISORDERS:											
Alcoholism (addiction).....	3	..	..	3	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	3	..	..	3	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	16	8	4	3	1	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	25	3	8	3	7	2	..	2	..	..	..
GRAND TOTAL.....	234	12	49	74	58	22	10	8	1	..	..

TABLE 3—ALL DISCHARGES—FIRST ADMISSIONS BY AGE AT DISCHARGE AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	7	..	..	1	6	..	..	..	..	..	..
Convulsive disorder.....	1	..	1	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	8	..	1	1	6	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	6	..	..	..	..	4	1	1	..	..	..
Other CNS syphilis.....	1	..	..	..	1	..	1	..	..	..	..
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	..	..
Cerebral arteriosclerosis.....	22	..	..	..	1	7	6	8	..	..	..
Other circulatory disturbance.....	1	..	..	..	1	..	..	..	..	..	..
Convulsive disorder.....	13	..	7	2	4	..	..	..	..	..	..
Senile brain disease.....	6	..	..	..	..	..	5	1	..	..	..
Diseases of unknown and uncertain cause.....	1	..	..	..	1	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES....	51	..	7	2	7	12	8	14	1	..	..
PSYCHOTIC DISORDERS:											
Involuntary psychotic reaction.....	4	..	..	..	1	2	1	..	..	..	..
Manic-depressive reaction.....	55	..	7	24	15	5	4	..	..	..	..
Schizophrenic reactions.....	76	..	8	46	20	2	..	..	..	..	..
Paranoid reactions.....	1	..	..	..	..	..	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	136	..	15	70	36	9	6	..	..	..	..
PSYCHONEUROTIC REACTION.....	3	..	..	1	..	1	1	..	..	..	..
PERSONALITY DISORDERS:											
Personality pattern disturbance.....	1	1	..	..	..	..	..	..	..	..	..
Personality trait disturbance.....	2	..	2	..	..	..	..	..	..	..	..
Alcoholism (addiction).....	1	..	..	1	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	4	1	2	1	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	35	6	13	7	8	1	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	14	4	6	1	1	1	1	..	..	..	..
GRAND TOTAL.....	251	11	44	83	58	24	16	14	1	..	..

TABLE 3—ALL DISCHARGES—READMISSIONS BY AGE AT DISCHARGE AND MENTAL DISORDERS—WHITE MALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:										
Alcohol intoxication.....	3	..	..	..	1	2	..	..	..	..
Drug or poison intoxication (except alcohol).....	3	..	..	..	1	..	2	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	6	..	..	..	2	2	2	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Disease and conditions due to prenatal (constitutional) influence	1	..	..	1	..	..	..	..	..	..
Alcohol intoxication.....	1	..	..	..	..	1	..	..	..	..
Drug or poison intoxication (except alcohol).....	1	..	..	..	..	1	..	..	..	..
Other trauma.....	1	..	..	..	..	1	..	..	..	..
Cerebral arteriosclerosis.....	11	..	..	..	..	..	5	5	1	..
Convulsive disorder.....	6	..	..	1	2	1	2	..	..	..
Senile brain disease.....	1	..	..	..	..	..	..	1	..	..
Other disturbance of metabolism, growth and nutrition	1	..	..	..	..	..	..	..	1	..
Chronic brain syndromes of unknown cause.....	1	..	..	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES....	24	..	..	2	3	3	8	6	2	..
PSYCHOTIC DISORDERS:										
Manic-depressive reaction.....	14	..	..	2	3	1	5	2	1	..
Schizophrenic reactions.....	40	..	5	11	12	11	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	54	..	5	13	15	12	6	2	1	..
PSYCHONEUROTIC REACTIONS.....	2	..	..	..	2	..	..	..	..	..
PERSONALITY DISORDERS:										
Personality pattern disturbance.....	1	..	..	1	..	..	..	..	..	..
Personality trait disturbance.....	1	..	..	..	..	1	..	..	..	..
Antisocial reaction.....	5	..	..	..	3	..	..	..	..	..
Alcoholism (addiction).....	33	..	..	6	12	11	2	2	..	..
Drug addiction.....	2	..	..	..	2	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	42	..	..	9	17	12	2	2	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE	1	..	..	..	1	..	..	..	..	..
MENTAL DEFICIENCY.....	6	..	1	2	2	1	..	..	..	..
WITHOUT MENTAL DISORDER.....	10	..	2	3	3	2	..	..	..	..
GRAND TOTAL.....	145	..	8	29	45	32	18	10	3	..

TABLE 3—ALL DISCHARGES—READMISSIONS BY AGE AT DISCHARGE AND MENTAL DISORDER—WHITE FEMALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)									Age Un- known
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	..	..
Drug or poison intoxication (except alcohol)....	3	..	..	..	2	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	4	..	..	..	3	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Birth trauma.....	1	1	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	22	..	..	..	..	3	8	9	2	..	..
Convulsive disorder.....	2	..	..	..	1	1	..	..	..	..	..
Other disturbance of metabolism, growth and nutrition	1	..	..	..	..	..	1	..	..	..	..
Intracranial neoplasm.....	1	..	..	..	1	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES....	27	1	..	..	2	4	9	9	2	..	..
PSYCHOTIC DISORDERS:											
Involuntary psychotic reaction.....	1	..	..	..	..	..	..	1	..	..	..
Manic-depressive reaction.....	20	..	..	..	1	12	6	1	..	..	..
Schizophrenic reactions.....	82	..	2	22	31	16	11	..	..	..	..
Paranoid reactions.....	4	..	..	..	..	2	2	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	107	..	2	22	32	30	19	2	..	..	..
PSYCHONEUROTIC REACTIONS.....	23	..	..	1	8	7	3	4	..	..	..
PERSONALITY DISORDERS:											
Personality pattern disturbance.....	3	..	..	1	2	..	..	..	..	..	..
Personality trait disturbance.....	4	..	1	2	1	..	..	..	..	..	..
Antisocial reaction.....	1	..	..	1	..	..	..	..	..	..	..
Alcoholism (addiction).....	4	..	..	1	1	2	..	..	..	..	..
Drug addiction.....	2	..	..	..	2	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	14	..	1	5	6	2	..	..	..	..	..
MENTAL DEFICIENCY.....	4	..	..	1	3	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	1	..	..	..	1	..	..	..	..	..	..
GRAND TOTAL.....	180	1	3	29	55	44	31	15	2	..	..

TABLE 3—ALL DISCHARGES—READMISSIONS BY AGE AT DISCHARGE AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:										
Alcohol intoxication.....	2	..	..	1	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	..	..	1	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Meningoencephalitic syphilis.....	1	..	..	..	..	1	..	..	..	..
Alcohol intoxication.....	4	..	..	3	..	1	..	..	..	..
Birth trauma.....	2	1	1	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	9	..	..	..	..	1	6	1	1	..
Convulsive disorder.....	5	..	2	..	3	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES....	21	1	3	3	3	3	6	1	1	..
PSYCHOTIC DISORDERS:										
Manic-depressive reaction.....	5	..	..	..	..	2	2	1	..	..
Schizophrenic reactions.....	17	..	5	4	7	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	22	..	5	4	7	3	2	1	..	..
MENTAL DEFICIENCY.....	2	..	..	1	1	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	3	..	..	1	1	..	1	..	..	..
GRAND TOTAL.....	50	1	8	10	13	6	9	2	1	..

TABLE 3—ALL DISCHARGES—READMISSIONS BY AGE AT DISCHARGE AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)									Age Un- known
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	3	..	..	..	..	2	..	1	..	..	..
Cerebral arteriosclerosis.....	6	..	..	..	..	2	2	2	..	..	..
Other circulatory disturbance.....	1	..	..	..	..	1	..	..	..	..	..
Senile brain disease.....	1	..	..	..	..	..	..	1	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES....	11	..	..	..	..	5	2	4	..	..	..
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	27	..	1	7	9	5	3	1	1	..	..
Schizophrenic reactions.....	31	..	5	11	12	2	1	..	..	..	..
Paranoid reaction.....	1	..	..	..	..	..	..	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	59	..	6	18	21	7	4	2	1	..	..
MENTAL DEFICIENCY.....	6	1	1	3	..	1	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	1	..	..	..	1	..	..	..	..	..	..
GRAND TOTAL.....	77	1	7	21	22	13	6	6	1	..	..

TABLE 4—ALL DISCHARGES—FIRST ADMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—WHITE MALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	NET LENGTH OF TIME IN HOSPITAL													
	Total	Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	19	19	..	..	..	..	..	..	..	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	8	7	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	27	26	1	..	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	2	..	1	..	1	..	..	..	..	..	..	..	..	..
Other CNS syphilis.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	3	2	..	1	..	..	..	..	..	..	..	..	..	..
Birth trauma.....	2	1	1	..	..	..	..	..	..	..	..	..	..	..
Other trauma.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	47	28	13	4	..	2	..	..	..	..	..	..	..	..
Other circulatory disturbance.....	2	1	1	..	..	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	12	6	1	3	..	..	..	..	2	..	..	..	..	..
Senile brain disease.....	3	2	..	..	..	..	1	..	..	..	..	..	..	..
Intracranial neoplasm.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Diseases of unknown and uncertain cause.....	2	2	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	76	45	17	8	1	2	1	..	2	..	..	..	..	..
PSYCHOTIC DISORDERS:														
Involutional psychotic reaction.....	5	3	1	1	..	..	..	..	..	..	..	..	..	..
Manic-depressive reaction.....	18	10	3	4	1	..	..	..	..	..	..	..	..	..
Schizophrenic reactions.....	84	30	37	7	2	3	1	..	3	1	..	..	..	..
Paranoid reactions.....	4	..	1	..	1	..	..	..	2	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	111	43	42	12	4	3	1	..	5	1	..	..	..	..
PSYCHOPHYSIOLOGIC AUTONOMIC AND VISCERAL DISORDERS.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
PSYCHONEUROTIC REACTIONS.....	26	20	4	1	1	..	..	..	..	..	..	..	..	..

PERSONALITY DISORDERS:

Personality pattern disturbance.....	2	2	..	..	..	..	..	..	..	..	..	..	..	..	..
Personality trait disturbance.....	12	12	..	..	..	..	..	..	..	..	..	..	..	..	..
Antisocial reaction.....	12	12	..	..	..	..	..	..	..	..	..	..	..	..	..
Dyssocial reaction.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..
Sexual deviation.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..
Alcohol (addiction).....	105	105	..	..	..	..	..	..	..	..	..	..	..	..	..
Drug addiction.....	2	2	..	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	135	135	..	..	..	..	..	..	..	..	..	..	..	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE.....	3	2	..	1	..	..	..	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	8	4	1	1	2	..	..	..	..	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	50	50	..	..	..	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	437	326	65	23	8	5	2	..	7	1	..	..	..	..	..

TABLE 4—ALL DISCHARGES—FIRST ADMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	3	3	..	..	..	..	..	..	..	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	11	10	1	..	..	..	..	..	..	..	..	..	..	..
All other conditions.....	2	1	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	16	14	2	..	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Epidemic encephalitis.....	1	..	..	..	..	..	..	..	..	1	..	..	..	..
Alcohol intoxication.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
Birth trauma.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	40	28	10	1	..	..	..	..	1	..	..	..	..	..
Other circulatory disturbance.....	4	4	..	..	..	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	9	6	1	1	..	..	..	1	..	..	..	..	..	..
Senile brain disease.....	3	2	..	..	..	..	..	1	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	59	41	11	2	1	..	..	2	1	1	..	..	..	..
PSYCHOTIC DISORDERS:														
Involutional psychotic reaction.....	10	9	1	..	..	..	..	..	..	..	..	..	..	..
Manic-depressive reaction.....	9	5	1	2	..	..	..	..	..	1	..	..	..	..
Schizophrenic reactions.....	153	79	50	18	5	..	1	..	..	..	..	..	..	..
Paranoid reactions.....	2	1	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	174	94	53	20	5	..	1	..	..	1	..	..	..	..
PSYCHONEUROTIC REACTIONS.....	66	63	3	..	..	..	..	..	..	..	..	..	..	..
PERSONALITY DISORDERS:														
Personality pattern disturbance.....	5	5	..	..	..	..	..	..	..	..	..	..	..	..
Personality trait disturbance.....	13	13	..	..	..	..	..	..	..	..	..	..	..	..

Antisocial reaction.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..
Dyssocial reaction.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..
Alcoholism (addiction).....	9	9	..	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	29	29	..	..	..	..	..	..	..	..	..	..	..	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE.....	2	2	..	..	..	..	..	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	7	6	..	1	..	..	..	..	..	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	9	9	..	..	..	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	362	258	69	23	6	..	1	2	1	2	..	..	..	..	..

TABLE 4—ALL DISCHARGES—FIRST ADMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	NET LENGTH OF TIME IN HOSPITAL													
	Total	Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	27	25	2	..	..	..	..	..	..	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
All other conditions.....	2	1	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	30	27	3	..	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	9	..	..	3	1	1	..	..	3	1	..	..	..	..
Alcohol intoxication.....	27	18	7	..	..	..	..	..	..	..	..	..	..	..
Birth trauma.....	2	2	..	..	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	26	7	12	3	3	1	..	..	..	..	..	..	..	..
Other circulatory disturbance.....	1	..	1	1	..	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	8	1	5	..	1	1	..	..	..	..	..	..	..	..
Senile brain disease.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
Chronic brain syndromes of unknown cause.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	75	28	24	10	6	3	..	..	3	1	..	..	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	3	2	1	..	..	..	..	..	..	..	..	..	1	..
Schizophrenic reactions.....	82	8	25	22	15	6	2	1	2	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	85	10	26	22	15	6	2	1	2	..	..	..	1	..
PERSONALITY DISORDERS:														
Alcoholism (addiction).....	3	3	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	3	3	..	..	..	..	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	16	2	2	1	5	..	3	1	2	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	25	23	1	1	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	234	93	56	34	26	9	5	2	7	1	..	..	1	..

TABLE 4—ALL DISCHARGES—FIRST ADMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	7	6	1	..	..	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	8	7	1	..	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	6	1	1	..	1	2	..	..	1	..	..	..	..	..
Other CNS syphilis.....	1	..	..	..	..	1	..	..	..	..	..	..	..	..
Alcohol intoxication.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	22	10	4	4	2	..	..	..	2	..	..	..	..	..
Other circulatory disturbance.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	13	4	1	1	3	1	..	..	2	..	1	..	..	..
Senile brain disease.....	6	1	2	2	..	..	..	..	1	..	..	..	..	..
Diseases of unknown and uncertain cause.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	51	18	8	7	7	4	..	..	6	..	1	..	..	..
PSYCHOTIC DISORDERS:														
Involuntary psychotic reaction.....	4	2	1	..	..	1	..	..	..	..	..	..	..	..
Manic-depressive reaction.....	55	22	13	9	5	2	2	..	1	..	1	..	..	..
Schizophrenic reactions.....	76	9	18	21	5	4	7	4	6	..	1	1	..	..
Paranoid reactions.....	1	..	..	..	..	..	..	..	1	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	136	33	32	30	10	7	9	4	8	..	2	1	..	..
PSYCHONEUROTIC REACTIONS.....	3	3	..	..	..	..	..	..	..	..	..	..	..	..
PERSONALITY DISORDERS:														
Personality pattern disturbance.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Personality trait disturbance.....	2	2	..	..	..	..	..	..	..	..	..	..	..	..
Alcoholism (addiction).....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	4	3	..	1	..	..	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	35	3	4	12	4	5	2	..	3	2	..	..	..	..
WITHOUT MENTAL DISORDER.....	14	14	..	..	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	251	81	45	50	21	16	11	4	17	2	3	1	..	..

TABLE 4—ALL DISCHARGES—READMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	3	3	..	..	..	..	..	..	..	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	3	2	..	1	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	6	5	..	1	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Diseases and conditions due to prenatal (constitutional) influence.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
Alcohol intoxication.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Other trauma.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	11	6	4	..	1	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	6	2	3	1	..	..	..	..	..	..	..	..	..	..
Senile brain disease.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
Other disturbance of metabolism, growth, and nutrition.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Chronic brain syndrome of unknown cause.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	24	11	8	3	2	..	..	..	..	..	..	..	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	14	3	7	2	..	..	1	1	..	..	..	..	..	..
Schizophrenic reactions.....	40	16	11	7	3	..	2	..	1	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	54	19	18	9	3	..	3	1	1	..	..	..	..	..
PSYCHONEUROTIC REACTIONS.....	2	2	..	..	..	..	..	..	..	..	..	..	..	..
PERSONALITY DISORDERS:														
Personality pattern disturbance.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Personality trait disturbance.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Antisocial reaction.....	5	5	..	..	..	..	..	..	..	..	..	..	..	..

TABLE 4—ALL DISCHARGES—READMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	3	2	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	4	3	1	..	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Birth trauma.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	22	14	2	2	2	..	..	1	..	..	1	..	..	..
Convulsive disorder.....	2	1	..	1	..	..	..	..	..	..	..	..	..	..
Other disturbance of metabolism, growth, and nutrition.....	1	..	..	..	..	..	1	..	..	..	..	..	..	..
Intracranial neoplasm.....	1	..	..	..	..	..	1	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	27	16	2	3	2	..	2	1	..	..	1	..	..	..
PSYCHOTIC DISORDERS:														
Involuntional psychotic reaction.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Manic-depressive reaction.....	20	12	4	1	2	..	..	..	..	..	..	..	..	..
Schizophrenic reactions.....	82	32	25	11	6	3	..	..	4	1	..	..	..	..
Paranoid reactions.....	4	3	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	107	48	30	12	9	3	..	..	4	1	..	..	..	..
PSYCHONEUROTIC REACTIONS.....	23	16	3	2	1	..	1	..	..	..	..	..	..	..
PERSONALITY DISORDERS:														
Personality pattern disturbance.....	3	3	..	..	..	..	..	..	..	..	..	..	..	..
Personality trait disturbance.....	4	4	..	..	..	..	..	..	..	..	..	..	..	..
Antisocial reaction.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..

TABLE 4—ALL DISCHARGES—READMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	2	1	..	1	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	1	..	1	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Alcoholism intoxication.....	4	2	1	1	..	..	..	..	..	..	..	..	..	..
Birth trauma.....	2	..	1	..	1	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	9	1	6	1	1	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	5	1	..	2	1	..	1	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	21	4	8	5	3	..	1	..	..	..	..	..	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	5	2	..	2	1	..	..	..	..	..	..	..	..	..
Schizophrenic reactions.....	17	4	4	2	3	1	3	..	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	22	6	4	4	4	1	3	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	2	..	1	..	..	..	..	..	1	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	3	3	..	..	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	50	14	13	10	7	1	4	..	1	..	..	..	..	..

TABLE 4—ALL DISCHARGES—READMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	3	..	1	2	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	6	1	1	2	2	..	..	..	..	..	..	..	..	..
Other circulatory disturbance.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Senile brain disease.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	11	2	2	4	3	..	..	..	..	..	..	..	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	27	11	7	2	4	1	1	1	..	..	..	..	..	..
Schizophrenic reactions.....	31	5	9	6	3	1	3	..	3	..	..	1	..	..
Paranoid reactions.....	1	..	..	..	..	..	..	..	1	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	59	16	16	8	7	2	4	1	4	..	..	1	..	..
MENTAL DEFICIENCY.....	6	..	2	1	..	..	..	..	3	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	77	19	20	13	10	2	4	1	7	..	..	1	..	..

TABLE 5—ALL DISCHARGES BY CONDITION ON DISCHARGE AND MENTAL DISORDER—
WHITE MALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	Condition on Discharge				
	Total	Recovered	Improved	Unimproved	Unclassified
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:					
Alcohol intoxication.....	22	16	2	..	4
Drug or poison intoxication (except alcohol).....	11	7	2	..	2
TOTAL ACUTE BRAIN SYNDROMES.....	33	23	4	..	6
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:					
Diseases and conditions due to prenatal (constitutional) influence....	1	..	..	1	..
Meningoencephalitic syphilis.....	2	..	2	..	..
Other CNS syphilis.....	1	..	1	..	..
Alcohol intoxication.....	1	..	1	..	..
Drug or poison intoxication (except alcohol).....	4	1	2	..	1
Birth trauma.....	2	..	..	1	1
Other trauma.....	2	..	2	..	..
Cerebral arteriosclerosis.....	58	..	49	6	3
Other circulatory disturbance.....	2	..	2	..	..
Convulsive disorder.....	18	..	13	1	4
Senile brain disease.....	4	..	4	..	..
Other disturbance of metabolism, growth, and nutrition.....	1	..	..	1	..
Intracranial neoplasm.....	1	..	1	..	..
Diseases of unknown and uncertain cause.....	2	..	..	..	2
Chronic brain syndromes of unknown cause.....	1	..	1	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	100	1	78	10	11
PSYCHOTIC DISORDERS:					
Involuntary psychotic reaction.....	5	..	5	..	..
Manic-depressive reaction.....	32	..	29	..	3
Schizophrenic reactions.....	124	..	90	8	26
Paranoid reactions.....	4	..	..	..	4
TOTAL PSYCHOTIC DISORDERS.....	165	..	124	8	33
PSYCHOPHYSIOLOGIC AUTONOMIC AND VISCERAL DISORDERS.....	1	..	..	..	1
PSYCHONEUROTIC REACTIONS.....	28	..	22	1	5
PERSONALITY DISORDERS:					
Personality pattern disturbance.....	3	..	..	..	3
Personality trait disturbance.....	13	..	..	..	13
Antisocial reaction.....	17	..	..	..	17
Dyssocial reaction.....	1	..	..	..	1
Sexual deviation.....	1	..	..	..	1
Alcoholism (addiction).....	138	..	..	1	137
Drug addiction.....	4	..	..	..	4
TOTAL PERSONALITY DISORDERS.....	177	..	..	1	176
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE.....	4	1	..	..	3
MENTAL DEFICIENCY.....	14	..	4	2	8
WITHOUT MENTAL DISORDER.....	60	..	..	..	60
GRAND TOTAL.....	582	25	232	22	*303

*Includes those without mental illness.

TABLE 5—ALL DISCHARGES BY CONDITION ON DISCHARGE AND MENTAL DISORDER—
WHITE FEMALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	Condition on Discharge				
	Total	Recovered	Improved	Unimproved	Unclassified
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:					
Alcohol intoxication.....	4	1	..	..	3
Drug or poison intoxication (except alcohol).....	14	10	1	..	3
All other conditions.....	2	1	1	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	20	12	2	..	6
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:					
Epidemic encephalitis.....	1	..	1	..	..
Alcoholic intoxication.....	1	..	1	..	..
Birth trauma.....	2	..	..	..	2
Cerebral arteriosclerosis.....	62	..	57	1	4
Other circulatory disturbance.....	4	..	4	..	..
Convulsive disorder.....	11	..	6	..	5
Senile brain disease.....	3	..	2	..	1
Other disturbance of metabolism, growth, and nutrition.....	1	..	1	..	..
Intracranial neoplasm.....	1	..	1	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	86	..	73	1	12
PSYCHOTIC DISORDERS:					
Involutional psychotic reaction.....	11	..	11	..	..
Manic-depressive reaction.....	29	..	28	..	1
Schizophrenic reactions.....	235	..	222	5	8
Paranoid reactions.....	6	..	6	..	..
TOTAL PSYCHOTIC DISORDERS.....	281	..	267	5	9
PSYCHONEUROTIC REACTIONS.....	89	..	82	2	5
PERSONALITY DISORDERS:					
Personality pattern disturbance.....	8	..	..	..	8
Personality trait disturbance.....	17	..	2	..	15
Antisocial reaction.....	2	..	..	..	2
Dyssocial reaction.....	1	..	..	..	1
Alcoholism (addiction).....	13	1	1	..	11
Drug addiction.....	2	..	..	..	2
TOTAL PERSONALITY DISORDERS.....	43	1	3	..	39
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE.....	2	1	..	..	1
MENTAL DEFICIENCY.....	11	..	4	2	5
WITHOUT MENTAL DISORDER.....	10	..	..	..	10
GRAND TOTAL.....	542	14	431	10	*87

*Includes those without mental illness.

TABLE 5—ALL DISCHARGES BY CONDITION ON DISCHARGE AND MENTAL DISORDER—
COLORED MALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	Condition on Discharge				
	Total	Recovered	Improved	Unimproved	Unclassified
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:					
Alcohol intoxication.....	29	28	1	..	..
Drug or poison intoxication (except alcohol).....	1	1	..	..	..
All other conditions.....	2	1	1	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	32	30	2	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:					
Meningoencephalitic syphilis.....	10	..	9	1	..
Alcohol intoxication.....	31	9	23	..	..
Birth trauma.....	4	..	2	..	2
Cerebral arteriosclerosis.....	35	1	32	2	..
Other circulatory disturbance.....	1	..	1	..	..
Convulsive disorder.....	13	..	11	1	1
Senile brain disease.....	1	..	..	..	1
Chronic brain syndrome of unknown cause.....	1	..	..	1	..
TOTAL CHRONIC BRAIN SYNDROMES.....	96	10	77	5	4
PSYCHOTIC DISORDERS:					
Manic-depressive reaction.....	8	1	7	..	..
Schizophrenic reactions.....	99	..	90	8	1
TOTAL PSYCHOTIC DISORDERS.....	107	1	97	8	1
PERSONALITY DISORDERS:					
Alcoholism (addiction).....	3	..	..	..	3
TOTAL PERSONALITY DISORDERS.....	3	..	..	..	3
MENTAL DEFICIENCY.....	18	..	15	..	3
WITHOUT MENTAL DISORDER.....	28	..	..	..	28
GRAND TOTAL.....	284	41	191	13	*39

*Includes those without mental illness.

TABLE 5—ALL DISCHARGES BY CONDITION ON DISCHARGE AND MENTAL DISORDER—
COLORED FEMALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	Condition on Discharge				
	Total	Recovered	Improved	Unimproved	Unclassified
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:					
Alcohol intoxication.....	7	4	2	..	1
Convulsive disorder.....	1	1	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	8	5	2	..	1
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:					
Meningoencephalitic syphilis.....	9	..	9	..	..
Other CNS syphilis.....	1	..	..	1	..
Alcohol intoxication.....	1	1	..	..	..
Cerebral arteriosclerosis.....	28	..	27	1	..
Other circulatory disturbance.....	12	..	1	1	..
Convulsive disorder.....	13	..	12	1	..
Senile brain disease.....	7	..	6	1	..
Diseases of unknown and uncertain cause.....	1	..	1	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	62	1	56	5	..
PSYCHOTIC DISORDERS:					
Involuntary psychotic reaction.....	4	..	4	..	..
Manic-depressive reaction.....	82	6	75	..	1
Schizophrenic reactions.....	107	..	97	6	4
Paranoid reactions.....	2	..	2	..	..
TOTAL PSYCHOTIC DISORDERS.....	195	6	178	6	5
PSYCHONEUROTIC REACTIONS.....	3	..	..	..	3
PERSONALITY DISORDERS:					
Personality pattern disturbance.....	1	..	1	..	..
Personality trait disturbance.....	2	..	..	..	2
Alcoholism (addiction).....	1	..	..	..	1
TOTAL PERSONALITY DISORDERS.....	4	..	1	..	3
MENTAL DEFICIENCY.....	41	..	32	3	6
WITHOUT MENTAL DISORDER.....	15	..	..	..	15
GRAND TOTAL.....	328	12	269	14	*33

*Includes those without mental illness.

TABLE 6—ALL DEATHS—FIRST ADMISSIONS BY AGE AT DEATH AND MENTAL DISORDER—
WHITE MALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:										
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	..
All other conditions.....	1	..	..	..	..	..	1	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	..	..	..	1	..	1	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Meningoencephalitic syphilis.....	4	..	..	1	1	..	..	2	..	..
Other CNS syphilis.....	1	..	..	..	..	..	1	..	..	..
Alcohol intoxication.....	1	..	..	..	..	..	..	1	..	..
Drug or poison intoxication (except alcohol).....	1	..	..	1	..	..	..	..	..	..
Cerebral arteriosclerosis.....	87	..	..	..	..	6	14	25	36	6
Other circulatory disturbance.....	6	..	..	..	1	..	2	1	2	..
Convulsive disorder.....	4	..	1	..	1	1	1	..	..	..
Senile brain disease.....	8	..	..	..	..	..	..	4	2	2
Intracranial neoplasm.....	1	..	..	..	..	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	113	..	1	2	3	8	18	33	40	8
PSYCHOTIC DISORDERS:										
Manic-depressive reaction.....	1	..	..	1	..	..	..	..	..	..
Schizophrenic reactions.....	6	..	2	1	2	1	..	..	..	..
Paranoid reactions.....	2	..	..	..	..	1	..	1	..	..
TOTAL PSYCHOTIC DISORDERS.....	9	..	2	2	2	2	..	1	..	..
PSYCHONEUROTIC REACTIONS.....	1	..	..	..	..	..	..	1	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE.....	1	..	..	..	..	..	..	1	..	..
MENTAL DEFICIENCY.....	3	..	..	..	2	1	..	..	..	..
GRAND TOTAL.....	129	..	3	4	8	11	19	36	40	8

TABLE 6—ALL DEATHS—FIRST ADMISSIONS BY AGE AT DEATH AND MENTAL DISORDER—
WHITE FEMALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Meningoencephalitic syphilis.....	1	..	..	..	..	..	1	..	..	..
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	..
Birth trauma.....	1	..	..	1	..	..	..	..	..	..
Other trauma.....	1	..	..	..	1	..	..	..	..	..
Cerebral arteriosclerosis.....	53	..	..	..	..	1	11	23	15	3
Other circulatory disturbance.....	1	..	..	..	..	..	..	1	..	..
Senile brain disease.....	33	..	..	..	..	..	..	6	21	6
Other disturbance of metabolism, growth, & nutrition	1	..	..	..	..	..	1	..	..	..
Intracranial neoplasm.....	1	..	..	1	..	..	..	..	..	..
Diseases of unknown and uncertain cause.....	1	..	..	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	94	..	..	2	3	1	13	30	36	9
PSYCHOTIC DISORDERS:										
Involutional psychotic reaction.....	1	..	..	..	..	1	..	..	..	..
Manic-depressive reaction.....	2	..	..	..	..	1	1	..	..	..
Schizophrenic reactions.....	8	..	3	1	2	1	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	11	..	3	1	2	3	2	..	..	..
MENTAL DEFICIENCY.....	4	..	1	..	..	2	1	..	..	..
WITHOUT MENTAL DISORDER.....	1	1	..	..	..	..	..	..	..	..
GRAND TOTAL.....	110	1	4	3	5	6	16	30	36	9

TABLE 6—ALL DEATHS—FIRST ADMISSIONS BY AGE AT DEATH AND MENTAL DISORDER—
COLORED MALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:										
All other conditions.....	3	..	1	..	..	2	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	3	..	1	..	..	2	..	..	..	..
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:										
Meningoencephalitic syphilis.....	7	..	..	..	3	3	..	1	..	..
Other trauma.....	1	..	..	..	1	..	..	..	..	..
Cerebral arteriosclerosis.....	45	..	..	..	..	11	10	15	9	..
Other circulatory disturbance.....	2	..	..	..	..	..	..	..	1	1
Convulsive disorder.....	1	..	1	..	..	..	..	..	..	..
Senile brain disease.....	4	..	..	..	..	..	..	1	2	1
Disease of unknown and uncertain cause.....	3	..	..	1	..	1	..	..	..	..
Chronic brain syndrome of unknown cause.....	1	..	..	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	63	..	1	1	5	15	10	17	12	2
PSYCHOTIC DISORDERS:										
Manic-depressive reaction.....	1	..	..	..	..	..	1	..	..	..
Schizophrenic reaction.....	14	..	4	6	2	2	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	15	..	4	6	2	2	1	..	..	..
MENTAL DEFICIENCY.....	5	..	2	..	2	1	..	..	..	..
GRAND TOTAL.....	86	..	8	7	9	20	11	17	12	2

TABLE 6—ALL DEATHS—FIRST ADMISSIONS BY AGE AT DEATH AND MENTAL DISORDER—
COLORED FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:										
All other conditions.....	1	..	..	..	..	1	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	..	1	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Meningoencephalitic syphilis.....	1	..	..	..	..	..	1	..	..	..
Cerebral arteriosclerosis.....	15	..	..	..	..	4	2	4	5	..
Other circulatory disturbance.....	3	..	..	..	..	1	2	..	..	..
Convulsive disorder.....	3	..	2	..	1	..	..	..	..	..
Senile brain disease.....	13	..	..	..	..	..	3	2	6	2
TOTAL CHRONIC BRAIN SYNDROMES.....	35	..	2	..	1	5	8	6	11	2
PSYCHOTIC DISORDERS:										
Manic-depressive reaction.....	2	..	1	..	..	1	..	..	..	..
Schizophrenic reactions.....	4	..	..	2	..	1	..	..	..	1
Other	1	..	..	..	..	..	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	7	..	1	2	..	2	..	1	..	1
MENTAL DEFICIENCY.....	7	2	..	..	5	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	1	..	1	..	..	..	..	..	..	..
GRAND TOTAL.....	51	2	4	2	6	8	8	7	11	2

TABLE 6—ALL DEATHS—READMISSIONS BY AGE AT DEATH AND MENTAL DISORDER—
WHITE MALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:										
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Drug or poison intoxication (except alcohol).....	1	..	..	..	..	..	1	..	..	..
Cerebral arteriosclerosis.....	12	..	..	..	..	1	2	5	4	..
Schizophrenic reactions.....	1	..	..	..	..	..	1	..	..	..
Convulsive disorder.....	2	..	..	1	..	..	1	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	16	..	..	1	..	1	3	7	4	..
PSYCHOTIC DISORDERS:										
Involuntary psychotic reaction.....	1	..	..	..	..	..	..	..	1	..
Manic-depressive reaction.....	3	..	..	..	1	1	..	..	1	..
Schizophrenic reactions.....	5	..	..	1	1	2	..	1	..	..
Paranoid reactions.....	1	..	..	..	..	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	10	..	..	1	2	4	..	1	2	..
GRAND TOTAL.....	27	..	..	2	3	5	3	8	6	..

TABLE 6—ALL DEATHS—READMISSIONS BY AGE AT DEATH AND MENTAL DISORDER—
WHITE FEMALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Meningoencephalitic syphilis.....	1	..	..	..	1	..	..	..	..	..
Cerebral arteriosclerosis.....	3	..	..	1	..	..	1	5	1	..
Convulsive disorder.....	1	..	..	..	..	1	..	..	..	..
Intracranial neoplasm.....	1	..	..	..	..	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	12	..	..	1	1	1	1	5	3	..
PSYCHOTIC DISORDERS:										
Manic-depressive reaction.....	5	..	..	..	1	2	2	..	..	..
Schizophrenic reaction.....	7	..	..	2	5	..	..	..	..	..
Paranoid reactions.....	1	..	..	..	..	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	13	..	..	2	6	3	2	..	..	..
PSYCHONEUROTIC REACTIONS.....	2	..	..	..	..	1	..	1	..	..
MENTAL DEFICIENCY.....	3	..	..	..	..	1	2	..	..	..
GRAND TOTAL.....	30	..	..	3	7	6	5	6	3	..

TABLE 6—ALL DEATHS—READMISSIONS BY AGE AT DEATH AND MENTAL DISORDER—
COLORED MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Cerebral arteriosclerosis.....	8	..	..	..	..	1	2	3	1	1 ..
TOTAL CHRONIC BRAIN SYNDROMES.....	8	..	..	..	..	1	2	3	1	1 ..
PSYCHOTIC DISORDERS:										
Manic-depressive reaction.....	1	..	..	1	..	..	..	..	..	..
Schizophrenic reactions.....	4	..	3	..	1	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	5	..	3	1	1	..	..	..	..	..
GRAND TOTAL.....	13	..	3	1	1	1	2	3	1	1 ..

TABLE 6—ALL DEATHS—READMISSIONS BY AGE AT DEATH AND MENTAL DISORDER—
COLORED FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Meningoencephalitic syphilis..	1	..	..	1	..	..	..	..	..	..
Senile brain disease.....	1	..	..	..	..	..	..	..	1	..
TOTAL CHRONIC BRAIN SYNDROMES.....	2	..	..	1	..	..	..	..	1	..
PSYCHOTIC DISORDERS:										
Manic-depressive reaction.....	3	..	..	..	1	1	1	..	..	..
Schizophrenic reactions.....	3	..	..	..	1	2	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	6	..	..	..	2	3	1	..	..	..
MENTAL DEFICIENCY.....	1	..	..	..	..	..	1	..	..	..
GRAND TOTAL.....	9	..	..	1	2	3	2	..	1	..

TABLE 7—ALL DEATHS—FIRST ADMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL FOR THIS ADMISSION												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
All other conditions.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	2	..	..	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	4	..	..	1	..	..	..	..	1	2	..	..	..	..
Other CNS syphilis.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
Alcohol intoxication.....	1	..	..	..	..	..	..	..	..	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	1	..	..	..	..	..	..	..	1	1	..	..	..	..
Cerebral arteriosclerosis.....	87	37	12	15	8	5	3	3	3	1	..	..	..	..
Other circulatory disturbance.....	6	5	..	1	..	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	4	..	..	..	..	..	1	..	..	..	..	1	..	1
Senile brain disease.....	8	3	..	2	..	..	..	1	2	..	..	..	..	..
Intracranial neoplasm.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	113	46	12	19	9	5	4	4	9	3	..	1	..	1
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	1	..	..	..	..	..	..	..	..	1	..	..	..	..
Schizophrenic reactions.....	6	..	..	..	2	..	..	..	1	1	..	..	1	1
Paranoid reactions.....	2	..	..	..	..	..	..	..	..	1	..	..	1	..
TOTAL PSYCHOTIC DISORDERS.....	9	..	..	..	2	..	..	..	1	2	1	..	2	1
PSYCHONEUROTIC REACTIONS.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE.....	1	..	..	..	..	..	1	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	3	..	..	..	..	1	..	..	1	..	1	..	..	..
GRAND TOTAL.....	129	48	12	19	12	6	5	4	11	5	2	1	2	2

TABLE 7—ALL DEATHS—FIRST ADMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL FOR THIS ADMISSION												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	1	..	..	..	..	..	..	1	..	..	..	..	..	..
Alcohol intoxication.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Birth trauma.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Other trauma.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	53	18	3	11	8	4	2	6	1	..	..	..	..	..
Other circulatory disturbance.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
Senile brain disease.....	33	7	4	6	5	3	5	2	1	..	..	..	..	..
Other disturbance of metabolism, growth, and nutrition.....	1	..	..	..	..	..	..	1	..	..	..	..	..	..
Intracranial neoplasm.....	1	..	..	..	..	..	..	..	1	..	..	..	..	..
Diseases of unknown and uncertain cause.....	1	..	..	..	..	..	1	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	94	27	7	18	14	7	8	2	9	2	..	..	..	..
PSYCHOTIC DISORDERS:														
Involuntal psychotic reaction.....	1	..	..	..	..	..	..	..	..	1	..	..	..	..
Manic-depressive reaction.....	2	..	..	1	..	..	..	..	..	1	..	..	..	..
Schizophrenic reactions.....	8	2	..	1	..	..	..	1	1	..	..	1	2	..
TOTAL PSYCHOTIC DISORDERS.....	11	2	..	2	..	..	..	1	1	2	..	1	2	..
MENTAL DEFICIENCY.....	4	..	..	..	..	..	..	2	1	..	..	1	..	..
WITHOUT MENTAL DISORDERS.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	110	30	7	20	14	7	8	2	12	4	2	..	2	2

TABLE 7—ALL DEATHS—FIRST ADMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL FOR THIS ADMISSION												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
All other conditions.....	3	3	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	3	3	..	..	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	7	1	..	1	..	..	..	2	1	1	..	1	..	..
Other trauma.....	1	..	..	..	..	..	..	..	1	..	..	..	..	..
Cerebral arteriosclerosis.....	45	12	8	9	5	5	2	1	2	1	..	..	..	..
Other circulatory disturbance.....	2	..	1	..	..	..	..	..	1	..	..	..	..	..
Convulsive disorder.....	1	..	..	..	..	..	..	..	1	..	..	..	..	..
Senile brain disease.....	4	..	1	1	1	..	1	..	..	..	..	..	..	..
Diseases of unknown and uncertain cause.....	3	2	..	..	..	..	..	..	..	..	..	..	..	..
Chronic brain syndromes of unknown cause.....	1	..	..	..	..	..	..	..	..	..	..	..	..	1
TOTAL CHRONIC BRAIN SYNDROMES.....	63	15	10	11	6	5	3	3	6	2	..	1	..	1
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Schizophrenic reactions.....	14	..	1	..	..	4	2	..	1	2	..	..	1	3
TOTAL PSYCHOTIC DISORDERS.....	15	1	1	..	..	4	2	..	1	2	..	..	1	3
MENTAL DEFICIENCY.....	5	..	..	..	..	..	..	..	1	..	2	..	1	1
GRAND TOTAL.....	86	19	11	11	6	9	5	3	8	4	2	1	2	5

TABLE 7—ALL DEATHS—FIRST ADMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	NET LENGTH OF TIME IN HOSPITAL FOR THIS ADMISSION												
	Total	Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:													
All other conditions.....	1	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	1	..	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:													
Meningoencephalitic syphilis.....	1	..	..	..	..	1	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	15	4	..	1	6	..	1	2	..	..	..	1	..
Other circulatory disturbance.....	3	1	..	..	..	1	..	..	..	1	..	..	..
Convulsive disorder.....	3	1	..	..	..	..	..	..	..	..	1	..	1
Senile brain disease.....	13	4	4	3	1	..	..	..	..	..	..	1	..
TOTAL CHRONIC BRAIN SYNDROMES.....	35	10	4	4	7	2	..	1	2	1	1	1	1
PSYCHOTIC DISORDERS:													
Manic-depressive reaction.....	2	..	..	..	..	..	..	..	..	1	..	1	..
Schizophrenic reactions.....	4	..	..	..	..	..	..	..	..	2	..	1	..
Other.....	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	7	..	..	..	..	..	..	..	..	4	..	2	1
MENTAL DEFICIENCY.....	7	..	..	..	2	..	1	1	2	..	..	..	1
WITHOUT MENTAL DISORDERS.....	1	1	..	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	51	12	4	4	9	2	1	2	4	5	1	3	2

TABLE 7—ALL DEATHS—READMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL FOR THIS ADMISSION												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Drug or poison intoxication (except alcohol).....	1	..	..	..	..	1	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	12	6	1	..	2	1	1	1	..	..	..	..	..	..
Other circulatory disturbance.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	2	..	..	..	..	..	..	..	..	..	..	1	1	..
TOTAL CHRONIC BRAIN SYNDROMES.....	16	6	1	1	2	2	1	1	..	..	..	1	1	..
PSYCHOTIC DISORDERS:														
Involutional psychotic reaction.....	1	..	..	..	..	..	..	1	..	..	..	..	..	..
Manic-depressive reaction.....	3	1	..	..	..	..	..	..	..	..	2	..	..	..
Schizophrenic reactions.....	5	2	..	..	1	..	..	..	..	..	..	..	1	1
Paranoid reactions.....	1	..	..	..	..	..	..	1	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	10	3	..	..	1	..	..	2	..	..	2	..	1	1
GRAND TOTAL.....	27	10	1	1	3	2	1	3	..	..	2	1	2	1

TABLE 1—ALL DEATHS—READMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL FOR THIS ADMISSION												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	1	..	..	..	..	3	1	..	..	..	..	..	1	..
Cerebral arteriosclerosis.....	7	1	1	..	1	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	3	..	..	1	..	..	..	1	..	..	..	..	1	..
Intracranial neoplasm.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	12	1	1	1	2	3	1	..	1	..	..	..	2	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	5	..	..	..	..	..	1	1	..	..	..	1	1	1
Schizophrenic reactions.....	7	..	..	1	..	..	..	..	..	..	2	1	..	3
Paranoid reactions.....	1	..	..	..	..	..	..	..	..	..	..	1	..	..
TOTAL PSYCHOTIC DISORDERS.....	13	..	..	1	..	..	1	1	..	..	2	3	1	4
PSYCHONEUROTIC REACTIONS.....	2	..	..	..	1	..	..	..	1	..	..	..	..	..
MENTAL DEFICIENCY.....	3	..	..	..	..	..	..	1	1	..	..	..	1	..
GRAND TOTAL.....	30	1	1	2	3	3	2	2	3	..	2	3	4	4

TABLE 7—ALL DEATHS—READMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	NET LENGTH OF TIME IN HOSPITAL FOR THIS ADMISSION													
	Total	Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Cerebral arteriosclerosis.....	8	..	1	2	3	..	1	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	8	..	1	2	3	..	1	..	1	..	..	..	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	1	..	..	..	..	..	..	..	..	..	1	..	..	..
Schizophrenic reactions.....	4	..	1	..	..	..	1	..	1	..	..	..	..	1
TOTAL PSYCHOTIC DISORDERS.....	5	..	1	..	..	..	1	..	1	..	1	..	..	1
GRAND TOTAL.....	13	..	2	2	3	..	2	..	2	..	1	..	..	1

TABLE 7—ALL DEATHS—READMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL FOR THIS ADMISSION												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	1	..	..	..	1	..	..	1	..	..	..	..	..	..
Senile brain disease.....	1	..	..	..	..	..	..	1	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	2	..	..	..	1	..	..	1	..	..	..	..	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	3	..	..	..	..	1	..	..	1	2	..	..	..	..
Schizophrenic reactions.....	3	1	..	..	..	1	..	..	..	..	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	6	1	..	..	..	1	..	..	1	2	1	..	..	..
MENTAL DEFICIENCY.....	1	..	..	..	..	..	..	..	..	..	1	..	..	..
GRAND TOTAL.....	9	1	..	..	1	1	..	1	1	2	2	..	..	..

TABLE 8—PATIENTS ON BOOKS—FIRST ADMISSIONS AT END OF YEAR BY AGE AT END OF YEAR
AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	3	..	..	..	1	..	2	..	..	..	..
All other conditions.....	1	..	..	..	1	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	4	..	..	..	2	..	2	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	77	..	..	6	8	29	14	18	2	..	..
Other CNS syphilis.....	4	..	..	..	..	1	2	1	..	..	..
Other intracranial infections.....	1	1	..	..	..	..	..	..	..	..	..
Alcohol intoxication.....	57	..	..	..	..	1	3	..	..	..	..
Drug or poison intoxication (except alcohol).....	22	..	..	..	1	..	1	..	..	..	..
Birth trauma.....	1	..	..	..	..	..	..	..	..	..	..
Other trauma.....	9	..	1	3	4	..	..	..	1	..	..
Cerebral arteriosclerosis.....	245	1	..	..	2	18	46	97	71	8	2
Other circulatory disturbance.....	16	..	1	1	3	1	2	5	2	1	..
Convulsive disorder.....	70	..	4	21	14	18	8	2	1	2	..
Senile brain disease.....	25	..	..	..	..	1	1	7	10	6	..
Other disturbance of metabolism, growth, and nutrition.....	7	..	..	..	..	..	2	4	1	..	..
Intracranial neoplasm.....	4	..	1	1	2	..	..	..	..	..	..
Diseases of unknown and uncertain cause.....	5	..	..	..	4	1	..	..	..	..	..
Chronic brain syndromes of unknown cause.....	3	..	..	..	2	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	474	2	7	32	42	71	79	134	88	17	2
PSYCHOTIC DISORDERS:											
Involuntary psychotic reaction.....	21	..	..	..	..	6	9	3	3	..	..
Manic-depressive reaction.....	82	..	1	5	16	24	20	16	..	..	..
Psychotic depressive reaction.....	51	..	..	..	..	4	1	..	..	..	..
Schizophrenic reactions.....	578	..	48	112	159	140	75	26	16	..	2
Paranoid reactions.....	17	1	..	..	1	2	5	5	2	..	1
Other.....	2	..	..	..	..	1	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	705	1	49	117	176	177	111	50	21	..	3
PSYCHONEUROTIC REACTIONS.....	36	..	1	11	6	10	5	2	1	..	..
PERSONALITY DISORDERS:											
Personality trait disturbance.....	5	..	1	3	..	1	..	..	..	..	..
Antisocial reaction.....	3	..	..	..	..	1	2	..	..	..	..
Sexual deviation.....	2	..	..	1	..	1	..	..	..	..	..
Alcoholism (addiction).....	12	..	..	2	3	5	1	1	..	..	..
Special symptom reaction.....	1	..	..	..	1	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	23	..	1	6	4	8	3	1	..	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE.....	1	..	..	..	1	..	..	..	..	..	..
MENTAL DEFICIENCY.....	102	..	9	20	32	23	13	5	..	..	..
WITHOUT MENTAL DISORDER.....	8	..	1	3	4	..	..	..	..	..	..
GRAND TOTAL.....	1353	3	68	189	267	289	213	192	110	17	5

TABLE 8—PATIENTS ON BOOKS—FIRST ADMISSIONS AT END OF YEAR BY AGE AT END OF YEAR
AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:										
Alcohol intoxication.....	2	..	..	..	1	1	..	..	..	..
All other conditions.....	1	..	..	..	..	1	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	3	..	..	..	1	2	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Meningoencephalitic syphilis.....	26	..	..	..	7	10	5	3	1	..
Other CNS syphilis.....	1	..	..	..	1	..	..	..	..	..
Epidemic encephalitis.....	3	..	..	..	2	1	..	..	..	..
Other intracranial infections.....	1	..	..	..	..	1	..	..	..	..
Other trauma.....	1	1	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	218	..	..	..	..	7	42	103	53	13
Other circulatory disturbance.....	23	..	1	2	3	5	8	3	1	..
Convulsive disorder.....	46	..	3	6	9	19	3	5	..	1
Senile brain disease.....	93	..	..	..	1	1	4	21	47	19
Other disturbance of metabolism, growth, and nutrition.....	13	..	..	..	1	2	4	5	1	..
Intracranial neoplasm.....	2	..	..	1	1	..	..	..	..	..
Diseases of unknown and uncertain cause.....	6	..	..	1	1	2	2	..	..	..
Chronic brain syndromes of unknown cause.....	5	..	..	3	..	1	1	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	438	..	5	13	26	49	69	140	103	32
PSYCHOTIC DISORDERS:										
Involutional psychotic reaction.....	42	..	..	..	2	13	12	10	4	1
Manic-depressive reaction.....	38	..	..	1	5	15	9	5	3	..
Schizophrenic reactions.....	759	1	25	129	189	160	141	80	17	4
Paranoid reactions.....	33	..	..	..	1	4	14	11	3	..
Other	2	..	..	1	..	..	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	874	1	25	131	197	192	177	106	27	5
PSYCHONEUROTIC REACTIONS.....	100	..	..	22	28	31	13	4	1	1
PERSONALITY DISORDERS:										
Personality trait disturbance.....	1	..	1	..	..	..	..	..	..	..
Antisocial reaction.....	1	..	..	..	..	..	1	..	..	..
Alcoholism (addiction).....	3	..	..	2	1	..	..	..	..	..
Drug addiction.....	1	..	..	..	..	1	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	6	..	1	2	1	1	1	..	..	..
MENTAL DEFICIENCY.....	75	..	4	7	14	15	19	9	6	1
WITHOUT MENTAL DISORDER.....	3	..	1	2	..	..	..	..	..	..
GRAND TOTAL.....	1499	1	36	177	267	290	279	259	137	38

TABLE 8—PATIENTS ON BOOKS—FIRST ADMISSIONS AT END OF YEAR BY AGE AT END OF YEAR
AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	16	..	..	2	5	3	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	1	..	..	1	..	..	..	..	..	..	..
All other conditions.....	7	..	2	2	2	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	18	..	2	5	7	4	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	132	..	2	6	27	53	25	12	7	..	..
Other CNS syphilis.....	2	..	..	..	..	1	1	..	..	..	..
Epidemic encephalitis.....	1	..	..	..	..	..	1	..	..	..	..
Alcohol intoxication.....	22	..	4	2	12	6	..	1	..	1	..
Birth trauma.....	6	..	3	..	..	..	..	..	..	..	..
Other trauma.....	6	..	..	..	..	..	2	..	..	..	..
Cerebral arteriosclerosis.....	184	..	..	..	5	51	53	57	15	2	1
Other circulatory disturbance.....	11	..	..	2	..	2	1	4	1	1	..
Convulsive disorder.....	75	..	13	34	17	7	4	..	..	..	..
Senile brain disease.....	12	..	..	..	..	..	..	1	8	3	..
Other disturbance of metabolism, growth, and nutrition	23	..	..	..	1	1	1	..	..	..	..
Diseases of unknown and uncertain cause.....	5	..	..	1	3	..	1	..	..	..	..
Chronic brain syndrome of unknown cause.....	6	..	1	2	2	..	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	477	..	23	57	72	121	90	75	31	7	1
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	44	..	2	8	11	16	5	1	..	..	1
Schizophrenic reactions.....	707	4	82	208	210	92	57	36	6	2	10
Other	2	..	..	..	..	..	1	..	..	..	1
TOTAL PSYCHOTIC DISORDERS.....	753	4	84	216	221	108	63	37	6	2	12
PERSONALITY DISORDERS:											
Antisocial reaction.....	2	..	..	2	..	..	..	..	..	..	..
Alcoholism (addiction).....	1	..	..	1	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	3	..	..	3	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	252	3	46	66	70	32	19	10	1	..	5
WITHOUT MENTAL DISORDER.....	6	..	2	..	3	1	..	..	..	..	..
GRAND TOTAL.....	1509	7	157	347	373	266	172	122	38	9	18

TABLE 8—PATIENTS ON BOOKS—FIRST ADMISSIONS AT END OF YEAR BY AGE AT END OF YEAR
AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	AGE (in years)									
	Total	Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:										
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	..
All other conditions.....	1	..	..	..	..	1	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	..	..	..	1	1	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Meningoencephalitic syphilis.....	26	..	..	1	8	12	1	3	1	..
Epidemic encephalitis.....	1	..	1	..	..	..	..	..	..	..
Alcohol intoxication.....	2	..	..	1	..	..	1	..	..	..
Birth trauma.....	1	..	1	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	153	..	..	..	4	31	52	55	11	..
Other circulatory disturbance.....	13	..	..	..	2	6	2	3	..	..
Convulsive disorder.....	51	..	6	15	15	9	3	3	..	..
Senile brain disease.....	66	..	..	..	1	1	2	25	24	13
Other disturbance of metabolism, growth, and nutrition	17	..	..	..	3	9	2	2	1	..
Diseases of unknown and uncertain cause.....	1	..	..	..	..	1	..	..	..	..
Chronic brain syndrome of unknown cause.....	4	..	2	1	..	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	335	..	10	18	31	65	67	90	40	13
PSYCHOTIC DISORDERS:										
Involuntary psychotic reaction.....	1	..	..	..	..	1	..	..	..	..
Manic-depressive reaction.....	165	..	4	20	63	45	19	10	3	..
Schizophrenic reactions.....	614	..	47	174	164	103	68	40	11	3
Paranoid reactions.....	13	..	..	1	1	4	4	3	..	..
TOTAL PSYCHOTIC DISORDERS.....	793	..	51	195	228	153	91	53	14	3
PSYCHONEUROTIC REACTIONS.....	4	..	..	2	1	1	..	..	..	..
PERSONALITY DISORDERS:										
Drug addiction.....	1	..	..	..	..	1	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	..	..	..	..	1	..	..	..	..
MENTAL DEFICIENCY.....	137	..	10	38	33	26	15	9	4	1
WITHOUT MENTAL DISORDER.....	2	..	..	1	1	..	..	..	..	..
GRAND TOTAL.....	1274	..	71	254	295	248	173	152	58	17

TABLE 8—PATIENTS ON BOOKS—READMISSIONS AT END OF YEAR BY AGE AT END OF YEAR
AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	2	..	..	..	..	2	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	1	..	..	..	1	..	..	..	..	..	..
All other conditions.....	2	..	1	..	..	..	1	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	5	..	1	..	1	2	1	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	19	..	..	..	5	9	5	..	..	..	..
Epidemic encephalitis.....	4	..	..	1	1	1	1	..	..	..	..
Alcohol intoxication.....	3	..	..	1	..	..	2	..	..	..	..
Other trauma.....	9	..	..	3	1	3	2	..	..	..	..
Cerebral arteriosclerosis.....	36	..	..	1	3	9	13	10	..	..	..
Other circulatory disturbance.....	3	..	..	..	1	1	1	..	..	..	..
Convulsive disorder.....	38	..	1	6	11	14	4	2	..	..	..
Senile brain disease.....	3	..	..	..	..	..	..	2	1	..	..
Intracranial neoplasm.....	1	..	..	..	..	1	..	..	..	..	..
Diseases of unknown and uncertain cause.....	1	..	..	..	..	1	..	..	..	..	..
Chronic brain syndrome of unknown cause.....	2	..	..	..	..	2	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	119	..	1	11	20	33	25	16	12	1	..
PSYCHOTIC DISORDERS:											
Involuntary psychotic reaction.....	5	..	..	..	1	..	3	1	..	..	..
Manic-depressive reaction.....	90	..	..	2	10	23	27	20	7	..	1
Schizophrenic reactions.....	261	..	9	50	77	68	31	19	5	..	2
Paranoid reactions.....	2	..	..	..	..	..	1	..	1	..	..
TOTAL PSYCHOTIC DISORDERS.....	358	..	9	52	88	91	62	40	13	..	3
PSYCHONEUROTIC REACTIONS.....	13	..	1	..	4	3	2	2	..	..	1
PERSONALITY DISORDERS:											
Antisocial reaction.....	2	..	..	..	1	..	..	1	..	..	..
Alcoholism (addiction).....	9	..	..	..	2	4	2	1	..	..	..
TOTAL PERSONALITY DISORDERS.....	11	..	..	..	3	4	2	2	..	..	..
MENTAL DEFICIENCY.....	32	..	2	8	7	8	6	1	..	..	..
WITHOUT MENTAL DISORDER.....	6	..	1	..	1	1	1	..	..	..	2
GRAND TOTAL.....	544	..	15	71	124	142	99	61	25	1	6

TABLE 8—PATIENTS ON BOOKS—READMISSIONS AT END OF YEAR BY AGE AT END OF YEAR
AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Drug or poison intoxication (except alcohol).....	1	..	..	..	..	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	..	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	7	..	..	..	3	3	1	..	..	..	..
Other CNS syphilis.....	1	..	..	..	..	..	1	..	..	..	..
Epidemic encephalitis.....	1	..	..	..	..	1	..	..	..	..	..
Alcohol intoxication.....	1	..	..	..	..	1	..	..	..	..	..
Birth trauma.....	1	..	..	1	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	65	..	..	..	..	1	13	32	16	2	1
Other circulatory disturbance.....	10	..	..	..	1	4	3	2	..	..	..
Convulsive disorder.....	44	..	1	6	6	16	10	3	1	1	..
Senile brain disease.....	5	..	..	..	..	..	..	3	1	1	..
Other disturbance of metabolism, growth, and nutrition	1	..	..	..	..	..	1	..	..	..	..
Intracranial neoplasm.....	1	..	..	..	..	..	1	..	..	..	..
Diseases of unknown and uncertain cause.....	4	..	..	..	1	3	..	..	..	..	..
Chronic brain syndrome of unknown cause.....	1	..	..	..	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	142	..	1	7	11	30	30	40	18	4	1
PSYCHOTIC DISORDERS:											
Involutional psychotic reaction.....	5	..	..	..	..	1	3	1	..	..	..
Manic-depressive reaction.....	66	1	..	1	2	17	22	17	5	1	..
Schizophrenic reactions.....	409	..	8	42	117	128	61	38	12	2	1
Paranoid reactions.....	17	..	..	..	1	3	8	2	3	..	..
TOTAL PSYCHOTIC DISORDERS.....	497	1	8	43	120	149	94	58	20	3	1
PSYCHONEUROTIC REACTIONS.....	46	..	1	5	11	12	12	2	2	..	1
PERSONALITY DISORDERS:											
Personality pattern disturbance.....	2	..	..	1	..	1	..	..	..	..	..
Antisocial reaction.....	4	..	1	..	..	..	2	1	..	..	..
Alcoholism (addiction).....	1	..	..	..	1	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	7	..	1	1	1	1	2	1	..	..	..
MENTAL DEFICIENCY.....	30	..	..	1	7	9	7	3	3	..	..
GRAND TOTAL.....	723	1	11	57	150	202	145	104	43	7	3

TABLE 8—PATIENTS ON BOOKS—READMISSIONS AT END OF YEAR BY AGE AT END OF YEAR
AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	2	..	1	..	..	..	1	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	..	1	..	..	..	1	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	2	..	..	..	1	..	..	1	..	..	..
Alcohol intoxication.....	11	..	..	1	6	4	..	..	..	..	..
Birth trauma.....	2	..	2	..	..	..	..	..	..	..	..
Other trauma.....	1	..	..	..	1	..	..	..	..	..	..
Cerebral arteriosclerosis.....	26	..	..	..	..	4	8	9	6	..	..
Other circulatory disturbance.....	2	..	..	..	..	..	1	..	..	..	..
Convulsive disorder.....	20	..	1	6	4	7	2	..	..	..	..
Other disturbance of metabolism, growth, and nutrition	1	..	..	..	..	..	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	65	..	3	7	12	15	12	10	6	..	..
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	32	..	..	..	9	5	10	3	3	2	..
Schizophrenic reactions.....	151	..	9	37	46	34	16	5	1	..	3
Paranoid reactions.....	2	..	..	..	..	..	..	1	1	..	..
PSYCHOTIC DISORDERS:											
TOTAL PSYCHOTIC DISORDERS.....	185	..	9	37	55	39	26	9	5	2	3
PERSONALITY DISORDERS:											
Alcoholism (addiction).....	1	..	..	..	1	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	..	..	..	1	..	..	..	..	..	..
MENTAL DEFICIENCY.....	23	..	3	4	7	4	2	1	..	..	2
GRAND TOTAL.....	276	..	16	48	75	58	41	20	11	2	5

TABLE 8—PATIENTS ON BOOKS—READMISSIONS AT END OF YEAR BY AGE AT END OF YEAR
AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:										
Drug or poison intoxication (except alcohol).....	1	..	..	..	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Meningoencephalitic syphilis.....	4	..	..	..	1	2	..	1	..	..
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	..
Birth trauma.....	1	..	..	..	1	..	..	..	..	..
Cerebral arteriosclerosis.....	21	..	..	..	..	8	11	2	..	..
Other circulatory disturbance.....	2	..	..	..	..	..	..	2	..	..
Convulsive disorder.....	14	..	..	3	4	5	2	..	..	..
Senile brain disease.....	7	..	..	..	..	..	..	4	3	..
Other disturbance of metabolism, growth, and nutrition	1	..	..	..	1	..	..	..	..	..
Diseases of unknown and uncertain cause.....	1	..	..	..	..	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	52	..	..	3	8	16	13	9	3	..
PSYCHOTIC DISORDERS:										
Involuntary psychotic reaction.....	1	..	..	..	..	1	..	..	..	..
Manic-depressive reaction.....	92	..	..	16	26	23	15	8	..	2
Schizophrenic reactions.....	193	..	4	48	56	32	24	20	7	..
Paranoid reactions.....	3	..	..	..	..	..	1	2	..	..
TOTAL PSYCHOTIC DISORDERS.....	289	..	4	64	82	56	40	30	7	4
MENTAL DEFICIENCY.....	28	..	2	6	13	3	3	..	1	..
WITHOUT MENTAL DISORDER.....	1	..	..	..	..	..	..	1	..	..
GRAND TOTAL.....	371	..	6	73	104	75	56	40	11	4

TABLE 9—PATIENTS ON BOOKS—FIRST ADMISSIONS AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	3	1	..	..	1	..	1	..	..	..	..	..	..	..
All other conditions.....	1	..	..	..	..	1	..	1	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	4	1	..	..	1	1	..	1	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	77	..	3	1	5	2	2	3	14	26	18	3	..	..
Other CNS syphilis.....	4	1	..	1	1	1	..	..	..	..	..	..	..	..
Other intracranial infections.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Alcohol intoxication.....	5	2	..	1	..	1	..	..	..	1	..	..	..	..
Drug or poison intoxication (except alcohol).....	2	..	..	..	..	..	..	..	..	1	..	..	..	1
Birth trauma.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
Other trauma.....	9	3	..	..	1	2	..	..	1	1	1	..	..	..
Cerebral arteriosclerosis.....	245	15	32	83	46	21	10	9	21	6	1	..	1	..
Other circulatory disturbance.....	16	3	1	3	1	2	2	..	3	..	1	..	..	..
Convulsive disorder.....	70	1	2	2	7	3	2	2	10	12	14	7	5	3
Senile brain disease.....	25	..	3	3	6	4	4	1	2	2	..	..	..	..
Other disturbance of metabolism, growth, and nutrition.....	7	1	..	..	..	1	..	..	..	1	1	1	2	1
Intracranial neoplasm.....	4	..	..	1	..	1	..	..	..	2	..	..	..	..
Diseases of unknown and uncertain cause.....	5	..	2	..	1	1	1	..	..	..	1	..	..	..
Chronic brain syndrome of unknown cause.....	3	..	1	1	..	..	..	..	..	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	474	26	43	99	67	38	21	15	51	53	37	11	8	5
PSYCHOTIC DISORDERS:														
Involutional psychotic reaction.....	21	1	1	4	2	..	..	1	3	3	2	3	1	..
Manic-depressive reaction.....	82	2	8	6	7	2	2	..	9	8	16	11	4	7
Psychotic depressive reaction.....	5	1	2	2	..	..	..	..	..	..	..	..	..	..
Schizophrenic reactions.....	578	20	43	79	41	20	25	17	55	50	63	59	38	68

Paranoid reactions.....	17	..	1	..	2	..	..	1	4	1	6	2	..	..
Other	2	..	..	..	..	..	..	..	..	..	..	1	1	..
TOTAL PSYCHOTIC DISORDERS.....	705	24	55	91	52	22	27	19	71	62	87	76	44	75
PSYCHONEUROTIC REACTIONS.....	36	7	2	8	10	1	..	1	1	3	1	2	..	..
PERSONALITY DISORDERS:														
Personality trait disturbance.....	5	4	1	..	..	..	..	..	..	..	..	..	1	..
Antisocial reaction.....	3	..	1	..	..	..	..	..	..	..	..	..	..	..
Sexual deviation.....	2	2	..	..	..	..	..	..	..	..	..	..	..	..
Alcoholism (addiction).....	12	11	..	..	..	..	..	..	..	1	..	..	..	..
Special symptom reaction.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	23	17	2	..	..	1	..	..	..	2	..	..	1	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	102	2	3	7	5	10	6	5	19	18	7	11	3	6
WITHOUT MENTAL DISORDERS.....	8	7	..	1	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	1353	84	105	207	135	73	54	41	142	138	132	100	56	86

TABLE 9—PATIENTS ON BOOKS—FIRST ADMISSIONS AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	2	2	..	..	..	..	..	..	..	..	..	..	..	..
All other conditions.....	1	..	..	..	..	..	..	..	..	..	..	1	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	3	2	..	..	..	..	..	..	..	..	..	1	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	26	..	..	1	..	..	1	2	7	7	8	..	..	..
Other CNS syphilis.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
Epidemic encephalitis.....	3	..	..	..	..	..	..	..	..	..	..	1	..	..
Other intracranial infections.....	1	..	..	..	..	1	..	..	..	..	..	..	..	..
Other trauma.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	218	18	27	40	39	24	16	13	31	8	1	..	..	1
Other circulatory disturbance.....	23	1	3	9	3	..	..	1	1	1	1	2	1	..
Convulsive disorder.....	46	2	..	1	3	..	1	1	6	8	6	11	2	5
Senile brain disease.....	93	4	9	13	26	15	10	5	4	1	2	2	1	1
Other disturbance of metabolism, growth, and nutrition.....	13	1	..	1	1	..	..	1	..	3	1	2	2	1
Intracranial neoplasm.....	2	..	..	..	..	..	..	..	..	..	..	..	..	..
Diseases of unknown and uncertain cause.....	6	1	1	..	..	..	1	1	..	..	..	..	..	..
Chronic brain syndromes of unknown cause.....	5	2	..	..	..	1	..	2	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	438	30	40	65	73	41	29	26	53	30	19	18	6	8
PSYCHOTIC DISORDERS:														
Involucional psychotic reaction.....	42	2	1	9	5	..	2	2	1	3	9	5	1	2
Manic-depressive reaction.....	38	3	1	3	2	1	..	..	2	3	6	8	5	4
Schizophrenic reactions.....	759	33	44	85	66	27	27	20	69	68	74	70	52	124
Paranoid reactions.....	33	..	..	2	..	..	1	2	5	8	5	6	3	1
Other.....	2	..	..	..	..	..	..	..	..	..	1	1	..	..
TOTAL PSYCHOTIC DISORDERS.....	874	38	46	99	73	28	30	24	77	82	95	90	61	131
PSYCHONEUROTIC REACTIONS.....	100	9	16	37	16	7	2	..	5	2	3	1	1	1

PERSONALITY DISORDERS:

Personality trait disturbance.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..
Antisocial reaction.....	1	..	..	..	..	..	..	..	..	..	1	..	..	..	..
Alcoholism (addiction).....	3	3	..	..	..	..	..	..	..	..	..	..	..	..	..
Drug addiction.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	6	5	..	..	..	..	..	..	..	..	1	..	..	..	..
MENTAL DEFICIENCY.....	75	2	2	9	4	1	..	2	7	13	9	5	6	15	..
WITHOUT MENTAL DISORDERS.....	3	2	..	1	..	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	149	88	104	211	166	77	61	52	142	127	127	115	74	155	..

TABLE 9—PATIENTS ON BOOKS—FIRST ADMISSIONS AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—COLORED MALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	10	2	2	..	..	..	..	3	1	1	1	..	..	..
Drug or poison intoxication (except alcohol).....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
All other conditions.....	7	4	1	..	..	..	..	..	1	1	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	18	7	3	..	..	..	..	3	2	2	1	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	132	2	2	16	15	6	9	5	36	23	15	3	..	..
Other CNS syphilis.....	2	..	..	..	..	..	..	..	..	..	1	..	..	1
Epidemic encephalitis.....	2	..	..	..	..	..	..	..	..	..	..	1	..	..
Alcohol intoxication.....	32	..	2	15	7	4	1	..	..	..	1	..	..	..
Birth trauma.....	7	..	..	..	..	2	4	..	1	..	..	..	..	..
Other trauma.....	6	..	2	..	1	..	..	1	1	..	..	1	..	..
Cerebral arteriosclerosis.....	184	20	26	29	40	17	10	4	24	11	3	..	..	..
Other circulatory disturbance.....	11	..	1	..	1	..	..	..	..	..	2	6	..	1
Convulsive disorder.....	75	..	1	8	7	4	3	3	15	15	10	6	..	3
Senile brain disease.....	12	..	..	..	2	1	2	1	4	2	..	..	..	..
Other disturbance of metabolism, growth, and nutrition.....	3	..	..	..	..	..	..	..	..	1	..	2	..	..
Diseases of unknown and uncertain cause.....	5	..	..	..	3	1	..	..	..	..	..	..	..	1
Chronic brain syndromes of unknown cause.....	6	..	..	..	..	1	1	4	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	477	22	34	70	75	37	31	18	81	51	33	17	2	6
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	44	3	2	2	4	1	1	1	8	7	4	5	4	2
Schizophrenic reactions.....	707	25	20	47	82	40	59	35	117	81	61	35	38	67
Other.....	2	..	..	..	..	..	..	..	..	1	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	753	28	22	49	86	41	60	36	125	89	66	40	42	69

PERSONALITY DISORDERS:

Antisocial reaction.....	2	1	..	..	..	..	..	..	1	..	..	..	..
Alcoholism (addiction).....	1	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	3	2	..	..	..	..	..	..	1	..	..	..	..
MENTAL DEFICIENCY.....	252	..	5	7	11	13	8	15	47	44	36	25	15	26
WITHOUT MENTAL DISORDER.....	6	3	..	2	..	..	1	..	..	..	..	..	..	..
GRAND TOTAL.....	1509	62	64	128	172	91	100	72	255	187	136	82	59	101

TABLE 9—PATIENTS ON BOOKS—FIRST ADMISSIONS AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
All other conditions.....	1	..	..	..	..	..	..	..	..	..	1	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	1	..	..	..	..	..	..	..	..	1	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	26	..	..	1	3	..	2	4	10	1	5	..	..	..
Epidemic encephalitis.....	1	..	..	..	..	..	1	..	..	..	..	..	..	..
Alcohol intoxication.....	2	..	..	1	..	..	..	..	..	..	..	..	..	..
Birth trauma.....	1	..	..	..	..	..	..	..	..	1	..	..	..	..
Cerebral arteriosclerosis.....	153	2	4	25	27	15	17	14	24	9	2	3	..	..
Other circulatory disturbance.....	13	..	..	..	..	1	..	..	..	..	..	..	..	..
Convulsive disorder.....	51	3	4	4	..	2	..	5	1	5	5	2	..	..
Senile brain disease.....	66	..	2	12	15	10	4	..	7	12	4	5	..	1
Other disturbance of metabolism, growth, and nutrition.....	17	..	1	1	..	..	..	..	8	7	1	1	4	1
Diseases of unknown and uncertain cause.....	1	..	..	..	..	..	..	..	2	1	4	3	4	1
Chronic brain syndromes of unknown cause.....	4	..	..	..	..	..	1	1	1	..	1	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	335	15	11	48	45	29	27	24	53	32	23	13	12	3
PSYCHOTIC DISORDERS:														
Involutional psychotic reaction.....	1	..	..	..	..	..	..	..	..	1	..	..	..	..
Manic-depressive reaction.....	165	9	9	14	26	5	5	4	12	27	25	14	8	7
Schizophrenic reactions.....	614	7	12	53	58	37	18	30	119	89	45	33	37	76
Paranoid reactions.....	13	..	..	..	..	..	..	1	..	5	5	2	..	..
TOTAL PSYCHOTIC DISORDERS.....	793	16	21	67	84	42	23	35	131	122	75	49	45	83
PSYCHONEUROTIC REACTIONS.....														
	4	..	1	2	1	..	..	..	..	..	..	..	..	..

TABLE 9—PATIENTS ON BOOKS—READMISSIONS AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	2	..	..	..	1	..	..	1	..	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
All other conditions.....	2	..	..	..	..	1	1	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	5	..	..	..	2	1	1	1	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	19	..	1	..	1	1	2	..	7	7	..	..	..	..
Epidemic encephalitis.....	4	..	..	2	..	..	..	..	1	..	..	..	..	..
Alcohol intoxication.....	3	..	1	..	1	..	1	..	..	..	..	..	..	..
Other trauma.....	9	..	..	..	3	1	1	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	36	4	3	9	6	4	2	1	2	1	1	1	..	..
Other circulatory disturbance.....	3	..	1	1	1	..	1	..	..	..	..	..	..	..
Convulsive disorder.....	38	..	1	2	3	2	5	2	6	..	8	..	1	3
Senile brain disease.....	3	..	..	1	..	..	..	..	..	1	..	..	..	..
Intracranial neoplasm.....	1	..	..	..	..	..	..	..	..	1	..	..	..	..
Diseases of unknown and uncertain cause.....	1	..	..	..	..	..	1	..	..	..	..	..	..	..
Chronic brain syndrome of unknown cause.....	2	..	..	..	1	..	..	..	..	..	..	1	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	119	4	6	15	16	8	13	3	22	16	9	2	2	3
PSYCHOTIC DISORDERS:														
Involuntal psychotic reaction.....	5	1	..	1	..	..	..	..	2	..	..	..	1	..
Manic-depressive reaction.....	90	4	7	15	17	5	2	3	7	14	10	3	2	1
Schizophrenic reactions.....	261	15	13	31	28	17	11	9	35	25	22	15	15	25
Paranoid reactions.....	2	..	..	1	..	..	..	..	..	..	..	1	..	..
TOTAL PSYCHOTIC DISORDERS.....	358	20	20	48	45	22	13	12	44	39	32	19	18	26
PSYCHONEUROTIC REACTIONS.....	13	..	1	4	4	1	2	..	1	..	..	..	..	..

PERSONALITY DISORDERS:

Antisocial reaction.....	2	..	..	..	..	..	..	..	..	1	1	..	..
Alcoholism (addiction).....	9	6	1	1	..	..	..	..	..	..	..	1	..
TOTAL PERSONALITY DISORDERS.....	11	6	1	1	..	..	..	..	..	1	1	1	..
MENTAL DEFICIENCY.....*	32	1	..	3	4	2	6	2	3	7	2	1	1
WITHOUT MENTAL DISORDER.....	6	4	..	1	1	..	..	..	..	..	..	..	..
GRAND TOTAL.....	544	35	28	72	72	34	35	18	70	63	44	23	29

TABLE 9—PATIENTS ON BOOKS—READMISSIONS AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Drug or poison intoxication (except alcohol).....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	7	..	..	1	..	1	..	2	1	1	1	..	..	..
Other CNS syphilis.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
Epidemic encephalitis.....	1	..	..	..	..	..	..	..	..	1	..	..	..	..
Alcohol intoxication.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Birth trauma.....	1	..	..	..	..	..	1	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	65	6	5	9	14	7	8	4	7	3	2	..	..	..
Other circulatory disturbance.....	10	..	1	..	1	2	..	1	1	..	..	..	..	..
Convulsive disorder.....	44	1	2	2	4	1	2	2	2	4	6	4	6	8
Senile brain disease.....	5	1	..	1	1	..	..	..	1	..	..	..	..	1
Other disturbance of metabolism, growth, and nutrition.....	1	..	..	..	..	..	1	..	1	..	..	..	..	1
Intracranial neoplasm.....	1	..	..	..	..	..	..	..	..	..	..	..	..	1
Diseases of unknown and uncertain cause.....	4	1	1	2	..	..	..	..	..	..	..	..	..	1
Chronic brain syndromes of unknown cause.....	1	..	..	..	..	..	..	..	..	..	..	..	..	1
TOTAL CHRONIC BRAIN SYNDROMES.....	142	9	9	18	21	11	12	9	12	9	11	4	6	11
PSYCHOTIC DISORDERS:														
Involutional psychotic reaction.....	5	1	..	..	..	2	..	..	1	3	..	..	..	..
Manic-depressive reaction.....	66	3	1	7	10	2	3	3	6	12	5	9	4	1
Schizophrenic reactions.....	409	22	22	44	52	29	28	18	44	35	28	27	24	36
Paranoid reactions.....	17	..	..	1	3	1	..	..	2	5	2	2	1	..
TOTAL PSYCHOTIC DISORDERS.....	497	26	23	52	65	32	31	21	53	55	35	38	29	37
PSYCHONEUROTIC REACTIONS.....	46	6	4	13	7	4	2	..	2	2	3	1	2	..

PERSONALITY DISORDERS:														
Personality pattern disturbance.....	2	1	1	..	..	..	..	..	..	..	..	..	2	1
Antisocial reaction.....	4	..	..	1	..	..	..	..	..	..	..	..	..	..
Alcoholism (addiction).....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	7	2	1	1	..	..	..	..	..	..	..	..	2	1
MENTAL DEFICIENCY.....	30	..	1	2	1	1	..	3	4	10	1	2	2	3
GRAND TOTAL.....	723	43	38	86	95	48	45	33	71	76	50	45	41	52

TABLE 9—PATIENTS ON BOOKS—READMISSIONS AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	2	1	..	1	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	1	..	1	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	2	..	..	1	..	..	..	1	..	..	..	..	..	..
Alcohol intoxication.....	11	1	..	2	3	3	..	..	..	..	..	..	..	..
Birth trauma.....	2	..	..	1	..	1	..	..	..	..	..	..	..	..
Other trauma.....	1	..	..	..	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	26	3	2	5	4	..	3	2	3	..	..	..	..	..
Other circulatory disturbance.....	2	1	..	..	..	..	..	..	..	..	1	..	..	..
Convulsive disorder.....	20	..	3	2	..	2	1	1	5	3	..	2	1	..
Other disturbance of metabolism, growth, and nutrition.....	1	..	..	..	..	..	..	..	..	..	1	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	65	5	7	11	7	8	4	5	8	5	2	2	1	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	32	..	1	5	3	1	1	1	1	5	2	7	4	1
Schizophrenic reactions.....	151	3	6	10	19	24	15	11	21	12	4	11	3	12
Paranoid reactions.....	2	..	..	..	..	..	..	..	..	..	1	..	1	..
TOTAL PSYCHOTIC DISORDERS.....	185	3	7	15	22	25	16	12	22	17	7	18	8	13
PERSONALITY DISORDERS:														
Alcoholism (addiction).....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	23	..	..	2	1	1	..	2	6	4	2	..	1	4
GRAND TOTAL.....	276	10	14	29	30	34	20	19	36	26	11	20	10	17

TABLE 9—PATIENTS ON BOOKS—READMISSIONS AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—COLORED FEMALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Drug or poison intoxication (except alcohol).....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	4	..	..	..	..	..	..	2	..	1	1	..	..	..
Alcohol intoxication.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Birth trauma.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	21	3	1	5	5	1	2	1	2	..	..	..	1	..
Other circulatory disturbance.....	2	..	1	..	..	..	1	..	..	..	..	..	..	..
Convulsive disorder.....	14	..	..	1	..	..	1	2	1	4	4	..	..	..
Senile brain disease.....	7	..	2	..	1	1	1	2	..	..	..	..	..	..
Other disturbance of metabolism, growth, and nutrition.....	1	..	..	..	..	..	..	..	..	1	..	..	..	..
Diseases of unknown and uncertain cause.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	52	5	4	7	6	3	4	8	3	6	5	..	1	..
PSYCHOTIC DISORDERS:														
Involutional psychotic reaction.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Manic-depressive reaction.....	92	11	3	14	8	7	5	7	9	12	5	5	4	2
Schizophrenic reactions.....	193	9	8	17	12	6	8	10	34	25	8	11	17	28
Paranoid reactions.....	3	..	..	..	..	..	1	..	..	..	..	2	..	..
TOTAL PSYCHOTIC DISORDERS.....	289	20	11	32	20	13	14	17	43	37	13	18	21	30
MENTAL DEFICIENCY.....	28	2	2	..	5	2	4	..	1	5	..	1	3	3
WITHOUT MENTAL DISORDER.....	1	..	..	..	..	..	..	..	..	..	..	..	1	..
GRAND TOTAL.....	371	28	17	39	31	18	22	25	47	48	18	19	26	33

TABLE 10—FIRST ADMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY AGE AT END OF
YEAR AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (In Years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	1	..	..	..	..	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	..	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	3	..	..	..	2	1	..	..	..	..	..
Other CNS syphilis.....	1	..	..	..	1	..	..	..	..	..	..
Epidemic encephalitis.....	1	..	..	1	..	..	..	..	..	..	..
Alcohol intoxication.....	1	..	..	..	..	..	..	..	1	..	..
Other trauma.....	2	..	..	1	1	..	..	..	..	..	..
Cerebral arteriosclerosis.....	7	..	..	..	..	5	19	31	15	4	2
Other circulatory disturbance.....	3	..	..	..	1	1	1	..	..	..	..
Convulsion disorder.....	9	..	..	5	2	1	1	..	..	..	..
Senile brain disease.....	3	..	..	..	..	..	..	2	..	1	..
Intracranial neoplasm.....	1	..	..	..	1	..	..	..	..	..	..
Diseases of unknown and uncertain cause.....	2	..	..	..	1	1	..	..	..	..	..
Chronic brain syndromes of unknown cause.....	1	..	..	..	1	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	104	..	..	7	11	8	21	34	16	5	2
PSYCHOTIC DISORDERS:											
Involuntary psychotic reaction.....	4	..	..	..	..	1	1	1	1	..	..
Manic-depressive reaction.....	15	..	..	1	4	4	5	1	..	..	..
Psychotic depressive reaction.....	2	..	..	..	..	1	1	..	..	..	..
Schizophrenic reactions.....	107	..	25	29	27	21	3	..	..	..	2
Paranoid reactions.....	2	..	..	..	..	2	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	130	..	25	30	31	29	10	2	1	..	2
PSYCHONEUROTIC REACTIONS.....	16	..	1	6	3	3	1	1	1	..	..
PERSONALITY DISORDERS:											
Special symptom reaction.....	1	..	..	..	1	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	..	..	..	1	..	..	..	..	..	..
MENTAL DEFICIENCY.....	2	..	..	2	..	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	2	..	..	..	2	..	..	..	..	..	..
GRAND TOTAL.....	256	..	26	45	48	41	32	37	18	5	4

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1956.

TABLE 10—FIRST ADMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY AGE AT END OF YEAR AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (In Years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	3	..	..	..	1	1	1	..	..	..	..
Other CNS syphilis.....	1	..	..	..	1	..	..	..	..	..	..
Other intracranial infection.....	1	..	..	..	..	..	1	..	..	..	..
Cerebral arteriosclerosis.....	47	..	..	..	..	3	13	23	8	..	..
Other circulatory disturbance.....	9	..	..	..	1	2	5	1	..	..	..
Convulsive disorder.....	5	..	1	2	1	..	1	..	..	..	..
Senile brain disease.....	4	..	..	..	..	..	..	1	2	1	..
Other disturbance of metabolism, growth, and nutrition	1	..	..	..	1	..	..	..	..	..	..
Diseases of unknown and uncertain cause.....	1	..	..	..	..	1	..	..	..	..	..
Chronic brain syndromes of unknown cause.....	1	..	..	..	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	73	..	1	2	5	8	21	25	10	1	..
PSYCHOTIC DISORDERS:											
Involuntary psychotic reaction.....	15	..	..	..	4	7	3	1	..	..	..
Manic-depressive reaction.....	9	..	..	..	2	6	1	..	..	..	..
Schizophrenic reactions	160	1	18	55	51	24	9	1	..	..	1
Paranoid reactions.....	3	..	..	..	..	2	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	187	1	18	55	57	39	14	2	..	..	1
PSYCHONEUROTIC REACTIONS.....	65	..	1	17	19	17	9	2	..	..	..
MENTAL DEFICIENCY.....	8	..	1	1	3	2	1	..	..	..	..
WITHOUT MENTAL DISORDER.....	1	..	..	1	..	..	..	..	..	..	..
GRAND TOTAL.....	334	1	21	76	84	66	45	29	10	1	1

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1956.

TABLE 10—FIRST ADMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY AGE AT END OF YEAR AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (In Years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	1	..	..	1	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	1	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	5	..	..	1	2	..	..	..	1	..	..
Alcohol intoxication.....	24	..	4	6	9	4	..	1	..	..	..
Other trauma.....	1	..	..	1	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	21	..	..	..	2	5	6	7	1	..	..
Convulsive disorder.....	6	..	3	2	1	..	..	..	..	..	..
Senile brain disease.....	1	..	..	..	..	..	..	..	..	1	..
TOTAL CHRONIC BRAIN SYNDROMES.....	58	..	7	10	14	10	6	8	2	1	..
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	8	..	1	2	2	2	1	..	..	..	..
Schizophrenic reactions.....	58	1	18	25	10	3	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	66	1	19	27	12	5	2	..	..	..	..
MENTAL DEFICIENCY.....	5	..	3	2	..	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	1	..	1	..	..	..	..	..	..	..	..
GRAND TOTAL.....	131	1	30	40	26	15	8	8	2	1	..

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1956.

TABLE 10—FIRST ADMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY AGE AT END OF YEAR AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (In Years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Meningoencephalitic syphilis.....	3	..	..	..	3	..	..	..	..	..
Alcohol intoxication.....	1	..	..	1	..	..	..	..	..	..
Cerebral arteriosclerosis.....	25	..	..	..	1	13	10	..	1	..
Convulsive disorder.....	6	..	3	..	..	3	..	..	..	..
Senile brain disease.....	6	..	..	..	..	..	..	3	3	1
Other disturbance of metabolism, growth and nutrition	1	..	..	..	..	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	42	..	3	1	4	17	10	3	3	1
PSYCHOTIC DISORDERS:										
Manic-depressive reaction.....	37	..	3	10	14	8	1	1	..	..
Schizophrenic reactions.....	102	1	19	45	17	7	2	11	..	..
TOTAL PSYCHOTIC DISORDERS.....	139	1	22	55	31	15	3	12	..	..
PSYCHONEUROTIC REACTIONS.....	3	..	..	1	1	1	..	..	..	..
MENTAL DEFICIENCY.....	10	..	2	5	3	..	..	..	..	..
GRAND TOTAL.....	194	1	27	62	39	33	13	15	3	1

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1956.

TABLE 10—READMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY AGE AT END OF YEAR AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (In Years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	1	..	..	..	..	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	..	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	1	..	..	..	..	..	1	..	..	..	..
Other trauma.....	1	..	1	..	..	..	1	..	..	..	..
Cerebral arteriosclerosis.....	1	..	..	..	1	..	3	6	1	..	..
Other circulatory disturbance.....	1	..	..	..	1	..	1	1	..	..	..
Convulsive disorder.....	1	..	2	..	..	1	1	..	..	..	1
TOTAL CHRONIC BRAIN SYNDROMES.....	24	..	3	2	2	1	6	7	2	..	1
PSYCHOTIC DISORDERS:											
Involuntary psychotic reaction.....	1	..	..	..	..	1	1	..	..	..	..
Manic-depressive reaction.....	1	..	..	1	2	5	10	7	1	..	1
Schizophrenic reactions.....	58	..	6	15	19	13	4	..	1	..	..
Paranoid reactions.....	1	..	..	..	..	..	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	88	..	6	16	21	19	16	7	2	..	1
PSYCHONEUROTIC REACTIONS.....	7	..	..	..	4	2	..	1	..	..	..
PERSONALITY DISORDERS:											
Alcoholism (addiction).....	1	..	..	..	1	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	..	..	..	1	..	..	..	..	..	..
MENTAL DEFICIENCY.....	1	..	..	2	..	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	3	..	..	..	1	1	..	..	..	..	1
GRAND TOTAL.....	126	..	9	20	29	24	22	15	4	..	3

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1956.

TABLE 10—READMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY AGE AT END OF YEAR AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (In Years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Other CNS syphilis.....	1	..	..	..	..	..	1	..	..	..	..
Alcohol intoxication.....	1	..	..	..	..	1	..	..	..	..	..
Cerebral arteriosclerosis.....	17	..	..	..	..	..	6	8	2	1	..
Other circulatory disturbance.....	5	..	..	..	..	2	2	1	..	..	..
Convulsive disorder.....	6	..	1	2	..	2	1	..	..	..	..
Intracranial neoplasm.....	1	..	..	..	1	..	..	..	..	..	..
Disease of unknown and uncertain cause.....	1	..	..	..	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	32	..	1	2	1	6	10	9	2	1	..
PSYCHOTIC DISORDERS:											
Involuntary psychotic reaction.....	1	..	1	..	..	..	..	..	..	..	..
Manic-depressive reaction.....	16	..	..	1	..	6	8	1	..	..	..
Schizophrenic reactions.....	103	..	3	21	40	32	6	1	..	..	..
Paranoid reactions.....	2	..	..	..	1	..	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	122	..	4	22	41	38	15	2	..	..	..
PSYCHONEUROTIC REACTIONS.....	23	..	..	4	4	8	6	..	..	..	1
MENTAL DEFICIENCY.....	1	..	..	..	1	..	..	..	..	..	..
GRAND TOTAL.....	178	..	5	28	47	52	31	11	2	1	1

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1956.

TABLE 10—READMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY AGE AT END OF YEAR AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (In Years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	1	..	..	..	..	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	..	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	7	..	..	1	4	2	..	..	..	..	..
Cerebral arteriosclerosis.....	7	..	..	..	..	1	4	2	..	..	..
Convulsive disorder.....	2	..	..	1	1	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	16	..	..	2	5	3	4	2	..	..	..
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	5	..	..	1	2	..	2	..	..	..	..
Schizophrenic reactions.....	18	1	4	6	7	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	23	1	4	7	9	..	2	..	..	..	..
GRAND TOTAL.....	40	1	4	9	14	4	6	2	..	..	..

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1956.

TABLE 10—READMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY AGE AT END OF YEAR AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	AGE (In Years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- Known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Drug or poison intoxication (except alcohol).....	1	..	..	..	1	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	1	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	1	..	..	..	1	..	..	..	..	..	..
Cerebral arteriosclerosis.....	3	..	..	..	..	1	1	1	..	..	..
Convulsive disorder.....	1	..	..	..	1	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	5	..	..	..	2	1	1	1	..	..	..
PSYCHOTIC DISORDERS:											
Involuntary psychotic reaction.....	1	..	..	..	..	1	..	..	..	..	..
Manic-depressive reaction.....	30	..	..	6	12	7	4	1	..	..	..
Schizophrenic reactions.....	25	..	2	12	9	2	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	56	..	2	18	21	10	4	1	..	..	..
MENTAL DEFICIENCY.....	4	..	..	2	2	..	..	..	..	..	..
GRAND TOTAL.....	66	..	2	20	26	11	5	2	..	..	..

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1956.

TABLE 11—FIRST ADMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	3	..	..	..	2	1	..	..	..	..	..	..	..	..
Other CNS syphilis.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Epidemic encephalitis.....	1	..	..	..	..	1	..	..	..	..	..	..	..	..
Alcohol intoxication.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Other trauma.....	2	1	..	..	1	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	77	1	16	44	10	3	1	1	1	..	..	..	..	..
Other circulatory disturbance.....	3	1	..	1	1	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	9	..	1	1	4	1	..	1	1	..	..	..	..	..
Senile brain disease.....	3	..	2	1	..	..	..	..	..	..	..	..	..	..
Intracranial neoplasm.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Diseases of unknown and uncertain cause.....	2	..	1	1	..	..	..	..	..	..	..	..	..	..
Chronic brain syndrome of unknown cause.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	104	3	21	51	17	7	1	2	2	..	..	..	..	..
PSYCHOTIC DISORDERS:														
Involutional psychotic reaction.....	4	..	..	2	1	..	..	..	..	..	..	..	1	..
Manic-depressive reaction.....	15	1	3	5	5	..	..	..	1	..	..	..	..	..
Psychotic depressive reaction.....	2	..	2	..	..	..	..	..	..	..	..	..	..	..
Schizophrenic reactions.....	107	4	22	47	19	3	4	4	2	..	..	2	..	..
Paranoid reactions.....	2	..	..	2	..	..	..	..	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	130	5	27	56	25	3	4	4	3	..	..	2	1	..
PSYCHONEUROTIC REACTIONS.....	16	..	1	7	8	..	..	..	..	..	..	..	..	..
PERSONALITY DISORDERS:														
Special symptom reaction.....	1	..	..	..	..	1	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	..	..	..	..	1	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	2	..	..	2	..	..	..	..	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	2	..	1	1	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	256	8	50	117	51	11	5	6	5	..	..	2	1	..

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1956.

TABLE 11—FIRST ADMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	3	..	..	1	..	..	..	..	1	..	1	..	..	..
Other CNS syphilis.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
Other intracranial infections.....	1	..	..	..	..	..	..	..	1	..	..	..	..	..
Cerebral arteriosclerosis.....	47	1	11	18	12	3	..	..	1	1	..	..	..	..
Other circulatory disturbance.....	9	1	2	4	2	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	5	2	..	1	..	..	..	..	2	..	..	..	..	..
Senile brain disease.....	4	..	..	3	1	..	..	..	..	..	..	..	..	..
Other disturbance of metabolism, growth, and nutrition.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Diseases of unknown and uncertain cause.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
Chronic brain syndrome of unknown cause.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	73	5	14	28	16	3	..	..	5	1	1	..	..	..
PSYCHOTIC DISORDERS:														
Involutional psychotic reaction.....	15	1	1	7	3	1	1	..	..	..	1	..	..	..
Manic-depressive reaction.....	9	2	1	4	1	..	..	..	1	..	..	..	..	..
Schizophrenic reactions.....	160	2	28	65	38	8	5	1	9	2	2	..	..	..
Paranoid reactions.....	3	..	..	2	..	..	..	1	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	187	5	30	78	42	9	6	2	10	2	3	..	..	..
PSYCHONEUROTIC REACTIONS.....	65	2	13	30	14	5	1	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	8	1	2	3	..	..	..	..	..	1	..	1	..	..
WITHOUT MENTAL DISORDER.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	334	13	59	140	72	17	7	2	15	4	4	1	..	..

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1956.

TABLE 11—FIRST ADMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	5	..	..	..	5	..	..	..	..	..	..	..	..	..
Alcohol intoxication.....	24	..	2	15	5	2	..	..	..	..	..	..	..	..
Other trauma.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	21	1	3	9	7	1	1	..	..	..	..	..	..	..
Convulsive disorder.....	6	..	3	3	..	1	1	..	1	..	..	..	..	..
Senile brain disease.....	1	..	..	..	1	..	1	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	58	1	5	27	19	3	2	..	1	..	..	..	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	8	1	2	2	2	1	..	..	..	..	..	..	..	..
Schizophrenic reactions.....	58	..	1	15	26	9	3	1	2	..	..	..	..	1
TOTAL PSYCHOTIC DISORDERS.....	66	1	3	17	28	10	3	1	2	..	..	..	..	1
MENTAL DEFICIENCY.....	5	..	1	1	..	1	1	..	1	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	131	2	10	46	47	14	6	1	4	..	..	..	..	1

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1956.

TABLE 11—FIRST ADMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	23	..	..	1	2	..	..	..	1	..	..	..	..	..
Alcohol intoxication.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	25	..	1	12	6	..	3	..	3	..	..	..	..	..
Convulsive disorder.....	6	..	2	3	1	..	..	..	..	..	..	..	..	..
Senile brain disease.....	6	..	..	4	..	..	..	..	1	1	..	..	..	..
Other disturbance of metabolism, growth, and nutrition.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	42	..	3	21	9	..	3	..	5	1	..	..	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	37	2	7	13	10	3	..	..	1	1	..	..	..	..
Schizophrenic reactions.....	102	..	3	37	35	11	2	4	7	2	..	1	..	..
TOTAL PSYCHOTIC DISORDERS.....	139	2	10	50	45	14	2	4	8	3	..	1	..	..
PSYCHONEUROTIC REACTIONS.....	3	..	1	..	2	..	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	10	..	..	3	1	..	2	1	3	..	..	..	..	..
GRAND TOTAL.....	194	2	14	74	57	14	7	5	16	4	..	1	..	..

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1956.

TABLE 11—READMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	1	..	..	..	..
Other trauma.....	2	..	..	..	1	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	12	..	2	4	3	..	..	1	2	..	..	..	..	..
Other circulatory disturbance.....	12	..	..	1	1	..	1	..	..	..	..	..	..	..
Convulsive disorder.....	7	..	..	1	1	2	1	..	2	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	24	..	2	5	7	2	2	1	4	1	..	..	..	..
PSYCHOTIC DISORDERS:														
Involuntal psychotic reaction.....	2	..	..	1	1	..	..	..	..	..	..	..	..	..
Manic-depressive reaction.....	27	..	3	9	9	4	..	1	..	..	..	..	1	..
Schizophrenic reactions.....	58	1	8	24	15	2	2	..	3	1	2	..	..	..
Paranoid reactions.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	88	1	11	35	25	6	2	1	3	1	2	..	1	..
PSYCHONEUROTIC REACTIONS.....	7	..	..	3	4	..	..	..	..	..	..	..	..	..
PERSONALITY DISORDERS:														
Alcoholism (addiction).....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	2	..	..	..	1	..	..	1	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	3	..	1	1	1	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	126	1	14	45	39	8	4	3	7	2	2	..	..	1

*Includes those on trial with...

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1956.

TABLE 11—READMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Other CNS syphilis.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
Alcohol intoxication.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	17	..	3	1	4	..	2	1	..	..	..	..	..	..
Other circulatory disturbance.....	5	..	1	1	1	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	6	..	2	1	1	..	..	1	1	..	..	..	..	..
Intracranial neoplasm.....	1	..	..	..	..	..	..	..	1	..	..	..	..	..
Diseases of unknown and uncertain cause.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	32	..	7	9	6	4	2	2	1	1	..	..	..	..
PSYCHOTIC DISORDERS:														
Involutional psychotic reaction.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Manic-depressive reaction.....	16	..	1	6	6	..	..	2	..	1	..	..	..	..
Schizophrenic reactions.....	103	3	9	33	30	12	6	3	4	3	..	..	..	..
Paranoid reactions.....	2	..	..	1	..	1	..	..	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	122	3	10	41	36	13	6	5	4	4	..	..	..	..
PSYCHONEUROTIC REACTIONS.....	23	..	2	13	5	2	1	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	1	..	..	..	..	..	1	..	..	..	..	..	..	..
GRAND TOTAL.....	178	3	19	63	47	19	10	7	5	5	..	..	..	..

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1956.

TABLE 11—READMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—COLORED MALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	7	..	2	1	3	1	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	7	..	..	3	2	..	2	..	..	..	..	..	..	..
Convulsive disorder.....	2	..	..	2	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	16	..	2	6	5	1	2	..	..	..	..	..	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	5	..	..	3	2	..	..	..	..	..	..	..	..	..
Schizophrenic reactions.....	18	..	1	4	6	5	2	..	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	23	..	1	7	8	5	2	..	..	..	..	..	..	..
GRAND TOTAL.....	40	..	3	14	13	6	4	..	..	..	..	..	..	..

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1956.

TABLE 11—READMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Drug or poison intoxication (except alcohol).....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	1	..	..	2	1	..	..	1	..	..	..	..	..	..
Cerebral arteriosclerosis.....	3	..	..	1	..	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	5	..	..	3	1	..	..	1	..	..	..	..	..	..
PSYCHOTIC DISORDERS:														
Involuntary psychotic reaction.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Manic-depressive reaction.....	30	3	2	15	4	2	2	..	2	..	..	..	..	..
Schizophrenic reactions.....	25	..	2	5	5	2	3	1	2	4	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	56	3	4	21	9	4	5	1	4	4	1	..	..	..
MENTAL DEFICIENCY.....	4	..	..	..	2	1	1	..	..	..	..	..	..	..
GRAND TOTAL.....	66	4	4	24	12	5	6	2	4	4	1	..	..	..

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1956.

TABLE 12—DISPOSITION OF FIRST ADMISSIONS WITHIN THE TWELVE MONTH PERIOD FOLLOWING ADMISSION BY MENTAL DISORDER—WHITE MALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total first admissions	Resident in Hospital	DISPOSITION			
			Discharges	On Trial Visit	Otherwise absent	Deaths
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:						
Alcohol intoxication.....	12	..	10	1	..	1
Drug or poison intoxication (except alcohol).....	4	..	4	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	16	..	14	1	..	1
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:						
Diseases and conditions due to prenatal (constitutional) influence	1	..	1	..	..	..
Meningoencephalitic syphilis.....	8	3	2	2	..	1
Other CNS syphilis.....	2	1	1	..	..	..
Alcohol intoxication.....	1	..	1	..	..	..
Drug or poison intoxication (except alcohol).....	9	..	9	..	..	..
Birth trauma.....	1	..	1	..	..	..
Other trauma.....	2	1	1	..	..	..
Cerebral arteriosclerosis.....	139	34	36	12	..	57
Other circulatory disturbance.....	12	..	3	1	..	8
Convulsive disorder.....	18	3	11	4	..	..
Senile brain disease.....	10	6	1	..	..	3
Other disturbance of metabolism, growth, and nutrition..	1	..	..	..	..	1
Intracranial neoplasm.....	2	..	2	..	..	..
Diseases of unknown and uncertain cause.....	1	..	1	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	207	48	70	19	..	70
PSYCHOTIC DISORDERS:						
Involuntional psychotic reaction.....	5	1	3	1	..	..
Manic-depressive reaction.....	21	2	14	5	..	..
Schizophrenic reactions.....	91	23	49	19	..	1
Paranoid reactions.....	2	2	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	119	27	66	25	..	1
PSYCHOPHYSIOLOGIC AUTONOMIC AND VISCERAL DISORDERS	2	..	2	..	..	..
PSYCHONEUROTIC REACTIONS.....	33	2	21	8	..	2
PERSONALITY DISORDERS:						
Personality pattern disturbance.....	5	..	5	..	..	..
Personality trait disturbance.....	6	..	6	..	..	..
Antisocial reaction.....	8	..	8	..	..	..
Dyssocial reaction.....	1	..	1	..	..	..
Sexual deviation.....	12	..	2	..	..	..
Alcoholism (addiction).....	117	..	117	..	..	..
Drug addiction.....	12	..	12	..	..	..
TOTAL PERSONALITY DISORDERS.....	151	..	151	..	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE	8	..	8	..	..	..
MENTAL DEFICIENCY.....	16	5	10	..	..	1
WITHOUT MENTAL DISORDER.....	57	..	57	..	..	..
GRAND TOTAL.....	609	82	399	53	..	75

TABLE 12—DISPOSITION OF FIRST ADMISSIONS WITHIN THE TWELVE MONTH PERIOD
FOLLOWING ADMISSION BY MENTAL DISORDER—WHITE FEMALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total first admissions	Resident in Hospital	DISPOSITION			
			Discharges	On Trial Visit	Otherwise absent	Deaths
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:						
Alcohol intoxication.....	2	..	2	..	..	..
Drug or poison intoxication (except alcohol).....	10	..	10	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	12	..	12	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:						
Other CNS syphilis.....	1	..	..	1	..	..
Other trauma.....	1	..	..	..	..	1
Cerebral arteriosclerosis.....	92	27	30	12	..	23
Other circulatory disturbance.....	8	1	4	2	..	1
Convulsive disorder.....	6	3	3	1	..	..
Senile brain disease.....	49	25	2	..	..	21
Other disturbance of metabolism, growth, and nutrition...	1	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	158	57	39	16	..	46
PSYCHOTIC DISORDERS:						
Involutional psychotic reaction.....	15	2	10	3	..	..
Manic-depressive reaction.....	9	1	7	1	..	..
Schizophrenic reactions.....	159	28	92	38	..	1
Paranoid reactions.....	2	..	2	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	185	31	111	42	..	1
PSYCHONEUROTIC REACTIONS.....	65	1	49	15	..	..
PERSONALITY DISORDERS:						
Personality pattern disturbance.....	3	..	3	..	..	..
Personality trait disturbance.....	18	..	18	..	..	..
Dyssocial reaction.....	3	..	3	..	..	..
Alcoholism (addiction).....	18	..	18	..	..	..
Drug addiction.....	6	..	6	..	..	..
TOTAL PERSONALITY DISORDERS.....	48	..	48	..	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE	4	..	4	..	..	..
MENTAL DEFICIENCY.....	18	4	14	..	..	..
WITHOUT MENTAL DISORDER.....	10	..	9	..	..	1
GRAND TOTAL.....	500	93	285	73	..	48

TABLE 12—DISPOSITION OF FIRST ADMISSIONS WITHIN THE TWELVE MONTH PERIOD
FOLLOWING ADMISSION BY MENTAL DISORDER—COLORED MALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total first admissions	Resident in Hospital	DISPOSITION			
			Discharges	On Trial Visit	Otherwise absent	Deaths
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:						
Alcohol intoxication.....	11	..	11	..	..	..
Drug or poison intoxication (except alcohol).....	2	..	2	..	..	..
All other conditions.....	2	..	..	..	..	2
TOTAL ACUTE BRAIN SYNDROMES.....	15	..	13	..	..	2
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:						
Meningoencephalitic syphilis.....	24	10	3	5	..	6
Other CNS syphilis.....	1	..	1	..	..	..
Alcohol intoxication.....	34	2	27	5	..	..
Birth trauma.....	1	..	1	..	..	..
Other trauma.....	1	..	..	1	..	..
Cerebral arteriosclerosis.....	72	33	17	7	..	15
Other circulatory disturbance.....	2	..	..	..	..	2
Convulsive disorder.....	12	7	4	..	..	1
Senile brain disease.....	6	1	..	1	..	4
Diseases of unknown and uncertain cause.....	4	3	..	..	..	1
TOTAL CHRONIC BRAIN SYNDROMES.....	157	56	53	19	..	29
PSYCHOTIC DISORDERS:						
Manic-depressive reaction.....	6	2	2	2	..	..
Schizophrenic reactions.....	117	56	35	26	..	..
TOTAL PSYCHOTIC DISORDERS.....	123	58	37	28	..	..
MENTAL DEFICIENCY.....	15	11	4	..	..	..
WITHOUT MENTAL DISORDER.....	30	..	29	..	..	1
GRAND TOTAL.....	340	125	136	47	..	32

TABLE 12—DISPOSITION OF FIRST ADMISSIONS WITHIN THE TWELVE MONTH PERIOD
FOLLOWING ADMISSION BY MENTAL DISORDER—COLORED FEMALE

Report for Year Ending June 30, 1956

MENTAL DISORDERS	Total first admissions	Resident in Hospital	DISPOSITION			
			Discharges	On Trial Visit	Otherwise absent	Deaths
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:						
Alcohol intoxication.....	5	..	5	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	5	..	5	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:						
Meningoencephalitic syphilis.....	5	1	2	2	..	..
Alcohol intoxication.....	2	..	2	..	..	..
Birth trauma.....	1	..	1	..	..	..
Cerebral arteriosclerosis.....	48	16	10	11	..	11
Other circulatory disturbance.....	2	..	1	..	..	1
Convulsive disorder.....	4	..	3	..	..	1
Senile brain disease.....	28	14	4	1	..	9
TOTAL CHRONIC BRAIN SYNDROMES.....	90	31	23	14	..	22
PSYCHOTIC DISORDERS:						
Involutional psychotic reaction.....	3	..	3	..	..	..
Manic-depressive reaction.....	58	15	32	11	..	..
Schizophrenic reactions.....	83	26	24	32	..	1
TOTAL PSYCHOTIC DISORDERS.....	144	41	59	43	..	1
PSYCHONEUROTIC REACTIONS.....	5	..	4	1	..	..
PERSONALITY DISORDERS:						
Alcoholism (addiction).....	1	..	1	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	..	1	..	..	..
MENTAL DEFICIENCY.....	20	3	15	1	..	1
WITHOUT MENTAL DISORDER.....	12	..	12	..	..	1
GRAND TOTAL.....	278	75	119	59	..	25